## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 61369
WRIGHT'S CATTLE FARM, INC.

(5)

FILED Feb 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				T KER HIN DITON NIBOD TITLE BUILD REIDT NIBH DIDIT BIDIT SIBIL DIĞIL BIDIT DIĞIL BIDIT ÜĞÜL					
280 CORPOIRATE WAY ORANGE PARK FL		280 CORPOIRATE WAY ORANGE PARK FL							
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						04/01/1979			
·	ace of Business	2a. Mailing Address				4. FEI Number	Ar Ar	oplied For	
21		[26]				59-1891365		ot Applicable	
Suite, Apt. :	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	<b>,</b>	Additionat equired	
City & State	<del></del>	City & State				# Floation Occasion Financias			
23	n '					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zφ				8. This corporation owes or has paid the current			
24	25	29	30			Personal Property Tax due June 30.	Yes Q	No	
	9, Name and Address of Current	Registered Agent				10. Name and Address of New Registered Ag			
WR	IGHT, EVELYN T			81	Name				
	5 COUNTY ROAD 315			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)			
GRI	EEN COVE SPRINGS FL 32043				0001710	across (170. Box Hallings to Hot / Hoopings)			
				83					
				84	City		35 Zip	Code	
11 Pureuant t	a the typy signe of Sections 607.05.03	and C/IZ 1508, Florida Statu	too the e	DOV40	named or	FL	onging if	o rapidorad	
office or re	cystered agent, or both, in the State of	of Florida, Such change was light of Soction 607 A606, Fl	authorize	d by	the corpor	orporation submits this statement for the purpose of ch ration's board of directors. I hereby accept the appoin	iment as	registered	
SIGNATURE	ortennia win, and accept the congr								
	Signature, typed or printed furne of registered riger		····	d Age	nt signature rec	quired when reinstating) DATE			
12.	OFFICERS AND		13.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND D			
TITLE	PD DETETE 1.5T					L.	Change	Addition	
NAME	WRIGHT, S A	1.4 CI							
STREET ADDRESS	3385 COUNTY ROAD 315 GREEN COVE SPGS FL				ADDRESS			] [	
CITY-ST-ZIP TITLE					I - ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	WRIGHT, EVELYN T					;· <b>└</b>	Lonarige		
STREET ADDRESS	3385 COUNTY ROAD 315		2.2 NAME 2.3 STREET		4000000				
CITY-ST-ZIP	GREEN COVE SPGS FL		2 4 0		1			1	
TITLE	CHECH COTE OF GOTE	DELETE	31 TI		1-21		Change	Addition	
NAME			32 N/						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			34. C						
TITLE		DELETE	4111		- 4"		Change	Addition	
NAME			4 2 N			_			
STREET ADDRESS					ADDRESS				
City-St-ZIP			4.4 Ci	TY-SI	r-ziP				
THLE	<del></del>	DELETE	51 Ti				Change	Addition	
NAME			5 2 N/	AME	1				
STREET ADDRESS			5.3 S1	REFT	ADDRESS				
CITY-ST-ZIP			5 4 CI	TY-SI	I - ZIP				
TITLE		☐ DELETE	6.1 11	TLE			Change	Addition	
NAME			6.2 NA	<b>ME</b>					
STREET ADDRESS			6.3 \$1	KEET	address			ŀ	
CITY-ST-7IP			6 4 CI	TY-\$1	r-ZIP				

14. I horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE EVELYN + MAINT ENDE THINK Y -20-97

904-284-3305