

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # 654068 1. Entity Name C & M RUCKS DAIRY, INC.	
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Principal Place of Business 22400 N.W. 14TH AVENUE OKEECHOBEE, FL 34972 US	Mailing Address 606 SW 28TH TERRACE OKEECHOBEE, FL 34974
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DO NOT WRITE IN THIS SPACE



01192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1957179	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RUCKS, MARGARET
606 SW 28TH TERRACE
OKEECHOBEE, FL 34974

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Margaret Rucks Margaret Rucks 1-19-04
Signature, typed or printed name of registered agent and title if applicable. (None. Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS RUCKS, MARGARET 606 S.W. 28TH TERRACE OKEECHOBEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUCKS, CHAD W 606 S W 28TH TERRACE OKEECHOBEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUCKS, HANKS A 606 SW 28TH TERRACE OKEECHOBEE, FL 34974
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01/23/04-80030-016 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margaret Rucks 1-19-04 863-467-1590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #