2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #654068

C & M RUCKS DAIRY, INC.



Mailing Address

22400 N.W. 144TH. AVENUE OKEECHOBEE, FL 34972 US

Principal Place of Business

606 SW 28TH, TERRACE OKEECHOBEE, FL 34974 US

FILED Jan 11, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

01082008 No Chq-P CR2E034 (11/05)

4. FEI Number 59-1957179 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

863 - 467 - 1590

6. Name and Address of Current Registered Agent

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

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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered			Registered Agent I	gent signature required when reinstating) DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS RUCKS, MARGARET 606 S.W. 28TH. TERRACE OKEECHOBEE, FL 34974					U00000779414 01/11/08-80037-001 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUCKS, CHAD W 22420 N.W. 144TH. AVE. OKEECHOBEE, FL 34972					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUCKS, HANKS A 2784 N.E. 62ND. PARKWAY OKEECHOBEE, FL 34972				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.						