

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 07, 2009
Secretary of State

DOCUMENT# 709424

Entity Name: FLORIDA CATTLEMEN'S ASSOCIATION, INC.**Current Principal Place of Business:**800 SHAKERAG ROAD
KISSIMMEE, FL 347421929**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 421929
KISSIMMEE, FL 347421929**New Mailing Address:****FEI Number:** 59-0573004**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HANDLEY, JIM
800 SHAKERAG ROAD
KISSIMMEE, FL 34744 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PE () Delete
Name: GRIGSBY, WADE
Address: 1165 COUNCIL ROAD
City-St-Zip: VENUS, FL 33960

Title: VP () Delete
Name: STRICKLAND, JIM
Address: 24615 OAK KNOLL ROAD
City-St-Zip: MYAKKA CITY, FL 34251

Title: S () Delete
Name: WILLIAMSON, WES
Address: PO BOX 248
City-St-Zip: OKEECHOBEE, FL 34973

Title: P () Delete
Name: HOBBS, BO
Address: 15720 SW 191 AVENUE
City-St-Zip: WILLISTON, FL 32696

Title: 2VP () Delete
Name: QUINCEY, DON
Address: 2350 NW 120TH STREET
City-St-Zip: CHIEFLAND, FL 32626

Title: T () Delete
Name: LARSON, WOODY
Address: 10000 HIGHWAY 98 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PE (X) Change () Addition
Name: STRICKLAND, JIM
Address: 24615 JOAK KNOLL ROAD
City-St-Zip: MYAKKA CITY, FL 34251

Title: VP (X) Change () Addition
Name: QUINCY, DON
Address: 2350 NW 120TH STREET
City-St-Zip: CHIEFLAND, FL 32626

Title: S (X) Change () Addition
Name: KEMPFFER, HENRY
Address: ONE BUMPY ROAD
City-St-Zip: MELBOURNE, FL 32904

Title: P (X) Change () Addition
Name: GRIGSBY, WADE
Address: 1165 COUNCIL ROAD
City-St-Zip: VENUS, FL 33960

Title: 2VP (X) Change () Addition
Name: LARSON, WOODY
Address: 10000 HIGHWAY 98 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: T (X) Change () Addition
Name: WILLIAMSON, WES
Address: PO BOX 248
City-St-Zip: OKEECHOBEE, FL 34973

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WADE GRIGSBY

P

08/07/2009

Electronic Signature of Signing Officer or Director

Date