

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712495

**FILED**  
**Jan 19, 2010**  
**Secretary of State**

**Entity Name:** HIGHLANDS COUNTY CATTLEMEN'S ASSOCIATION, INC.

**Current Principal Place of Business:**

4525 US 27  
SEBRING, FL 33870

**New Principal Place of Business:**

4525 US HWY 27  
SEBRING, FL 33870

**Current Mailing Address:**

PO BOX 321  
SEBRING, FL 33871

**New Mailing Address:**

**FEI Number:** 51-0165310      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CANNADY, CRAIG  
4525 US 27S  
SEBRING, FL 33870      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: P  
Name: STANLEY, PERRY  
Address: PO BOX 388  
City-St-Zip: VENUS, FL 33960

Title: T  
Name: CULLENS, CHARLES S  
Address: 9235 COUNTY ROAD 635  
City-St-Zip: SEBRING, FL 33875

Title: V  
Name: SAM, BRONSON  
Address: PO BOX 426  
City-St-Zip: LORIDA, FL 33857

Title: S  
Name: SEBRING, LINDSEY  
Address: 4525 US HWY 27  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: STOKES, EDGAR  
Address: 241 BAY ST, P.O. BOX 266  
City-St-Zip: LORIDA, FL 33857

I hereby 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 all other like empowered.

SIGNATURE: LINDSEY M SEBRING

S

01/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date