## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 715797** 

FILED Jul 08, 2008 Secretary of State

Entity Name: UNITED BRAFORD BREEDERS INC.

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
422 E. MAII ¥ 218 NACOGDO	N ST OCHES, TX 75961			
Current Mailing Address:		New Maili	ing Address:	
122 E. MAII ‡ 218 NACOGDO	N ST DCHES, TX 75961			
n accordanc	59-2412142 FEI Number Applied For ( ) FEI Note with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:	<del>-</del>	· ,	
	RD, R N IDIAN RIVER DR RCE, FL 34950 US			
	named entity submits this statement for the purpose of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Fitle: Name: Address: Dity-St-Zip:	PD () Delete ALLEMAN, BRYAN D 2709 ABBEVILLE HWY RAYNE, LA 70578	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition RAINER, BILL PO BOX 273 NEW SUMMERFIELD, TX 75780	
Title: Name: Address: Dity-St-Zip:	SD ( ) Delete HARVEY, JIM W DR 2949 HWY 70 WEST OKEECHOBEE, FL 34972	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition HARRINGTON, SHANNON 7068 N HARRINGTON RD IOWA, LA 70647	
itle: lame: lddress: City-St-Zip:	D () Delete STANBERRY, LARRY 996 VZ CR 1805 GRAND SALINE, TX 75140	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition ROBERT, MILLS 15535 CR 1123 ATHENS, TX 75751	
Fitle: Name: Address: City-St-Zip:	VD ( ) Delete RAINER, BILL PO BOX 273 NEW SUMMERFIELD, TX 75780	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HARVEY, JIM DR 2949 HWY 70 WEST OKEECHOBEE, FL 34972	
Title: Name: Nddress: Dity-St-Zip:	D ( ) Delete MILLS, ROBERT 15535 CR 1123 ATHENS, TX 75751	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition STEWART, ADAMS PO BOX 12909 FORT PIERCE, FL 34979	
Fitle: Name: Address: City-St-Zip:	D () Delete MIDYETTE, PAYNE H 10006 JOURNEYS END TALLAHASSEE, FL 32312	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: RODNEY L. ROBERSON C 07/08/2008