2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 07, 2008 8:00 am Secretary of State **DOCUMENT # 720230** 1. Entity Name 05-07-2008 90114 043 ****61.25 DAIRYMEN LODGE, INC. Principal Place of Business Mailing Address % GWEN ARRENDALE P.O. BOX 432 904 N COURT ST QUITMAN GA 31643 **QUITMAN GA 31643** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apr. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 25-6608478 Not Applicable Zíc Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WARREN JR, JESSE F. -119 WEST JEFFERSON Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL City Zip Code 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. SIGNATÜRE Signature, typerfor printed name of registered agent and title II applicable. (NOTE: Registered Agent signature rog ured when reinstating) a dijar rija, jedi, dejipa, terilija. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to-\$5.00 May Be Trust Fund Contribution. Due By May 1, 2008. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Z Delete TITLE TITLE Change FRANKLIN, SMITH NAME NAME 6788 PATTEN COOLIDGE RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COOLIDGE GA 31738 CiTY-ST-ZIP THE ☐ Delete TITLE ☐ Addition MCLANE, JANE NAME MAME PINECLIFF DR STREET ADDRESS STREET ADDRESS CITY- ST-7IP VALDOSTA GA 31601 CITY-ST-ZIP TITLE ☐ Delete TITLE Change 🔲 Addition GWEN, ARRENDALE NAME NAME STREET ADDRESS 904 N. CT. ST. STREET ADDPESS QUITMAN GA 31643 CITY-ST-ZIP CITY-ST-ZIP THILE Delete TITLE ☐ Change Addition BURTON, GLENN NAIZE NAME 13745 US HWY 84 E STREET ADDRESS STREET ADDRESS THOMASVILLE GA 31757 CITY-ST-ZIP CITY-ST-ZIP THIE ☐ Delete TITLE Chance Addition WHITAKER, GINGER NAME NAME 2415 JACKSON DAIRY RD STREET ADDRESS STREET ACOPESS BACONTON GA 31716 CITY-ST-ZIP CITY-ST-ZiP TITLE ☐ Delete TITLE ☐ Change Addition NANCY, TENNYSON NAME MAGNOLIA DR. STREET ADDRESS STREET ADDRESS QUITMAN GA 31643 CITY-ST-ZIP CITY-ST-ZIP

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 efficer 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered. Wen Strrendale

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information

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