

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90240 028 ****61.25

DOCUMENT # 720230

1. Entity Name

DAIRYMEN LODGE, INC.



Principal Place of Business

% GWEN ARRENDALE
904 N COURT ST
QUITMAN GA 31643
BR

Mailing Address

P.O. BOX 432
QUITMAN GA 31643
BR

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **25-4107538**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WARREN JR, JESSE F
119 WEST JEFFERSON
TALLAHASSEE FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **FRANKLIN, SMITH**
STREET ADDRESS **6788 PATTEN COOLIDGE RD.**
CITY-ST-ZIP **COOLIDGE GA 31738**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **HAROLD, BURTON**
STREET ADDRESS **12079 E. 84**
CITY-ST-ZIP **THOMASVILLE GA 31792**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **ST** ☐ Delete
NAME **GWEN, ARRENDALE**
STREET ADDRESS **904 N. CT. ST.**
CITY-ST-ZIP **QUITMAN GA 31643**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MCLANE, JANE**
STREET ADDRESS **PINECLIFF DR**
CITY-ST-ZIP **VALDOSTA GA 31601**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **T.E., BLAND**
STREET ADDRESS **5723 JUMPING GULLEY RD.**
CITY-ST-ZIP **VALDOSTA GA 31601**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **NANCY, TENNYSON**
STREET ADDRESS **MAGNOLIA DR.**
CITY-ST-ZIP **QUITMAN GA 31643**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

SIGNATURE:

Gwen Arrendale
Secretary of State
2-14-03 229-263 8375

CR2E037 (10/02)