


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90067 018 \*\*\*\*61.25

<b>DOCUMENT # 729120</b>					
1. Entity Name HENDRY COUNTY CATTLEMEN'S ASSOCIATION, INC.					
Principal Place of Business 1085 PRATT BLVD LABELLE, FL 33935 US			Mailing Address PO BOX 68 LABELLE, FL 33975 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
TOWNSEND, DALLAS B 320 STATE RD 29 S FELDA, FL 33930				Name <u>McAvoy, Gene</u>	
				Street Address (P.O. Box Number is Not Acceptable) <u>1900 B Rd</u>	
				City <u>LaBelle</u> FL Zip Code <u>33935</u>	
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.					
SIGNATURE <u>[Signature]</u> Signature, typed or printed name of registered agent and title if applicable				DATE <u>2/6/07</u> NOTE: Registered Agent signature required when reinstating	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D	<input type="checkbox"/> Delete	TITLE	GENE MCAVOY (Sec.)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JONES, GREG		NAME	1900 B Road	
STREET ADDRESS	312 CALOOSA E DR		STREET ADDRESS	LaBelle FL 33935	
CITY-ST-ZIP	LABELLE, FL 33935		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAY HULL		NAME	RAY HULL	
STREET ADDRESS	27531 DOOLEY GRADE		STREET ADDRESS	27531 Dooley Grade	
CITY-ST-ZIP	CLEWISTON, FL		CITY-ST-ZIP	Clewiston, FL 33440	
TITLE	DS	<input type="checkbox"/> Delete	TITLE	LEE SHEWMAKER (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WHIDDEN, JOHN		NAME	1566 N BRIDGEST	
STREET ADDRESS	3465 DEVILS GARDEN ROAD		STREET ADDRESS	LaBelle, FL 33935	
CITY-ST-ZIP	CLEWISTON, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	JOE M HILLIARD (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRIGSBY, WADE		NAME	5500 FLAG HOLE RD	
STREET ADDRESS	14500 CR 833		STREET ADDRESS	Clewiston, FL 33440	
CITY-ST-ZIP	CLEWISTON, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIS, JACK		NAME	Willis Jack	
STREET ADDRESS	PO BOX 53 NA, WILLIS RD		STREET ADDRESS	P.O. Box 53	
CITY-ST-ZIP	FELDA, FL 33930		CITY-ST-ZIP	Felda, FL 33930	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEEN, KENNETH		NAME	Raymond Crawford	
STREET ADDRESS	319 E. PARK AVE SE		STREET ADDRESS	2940 CASE ROAD	
CITY-ST-ZIP	MOORE HAVEN, FL 33471		CITY-ST-ZIP	LaBelle, FL 33935	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE <u>2/6/07</u> Daytime Phone # <u>(863) 227-1025</u>	