

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 791087

FILED
Apr 27, 2009
Secretary of State

Entity Name: UNITED FEED COOP., INC.

Current Principal Place of Business:

708 N.W. 2ND AVENUE
P.O. BOX 485
OKEECHOBEE, FL 349737485

New Principal Place of Business:

708 N.W. 2ND AVENUE
OKEECHOBEE, FL 34972 US

Current Mailing Address:

708 N.W. 2ND AVENUE
P.O. BOX 485
OKEECHOBEE, FL 349737485

New Mailing Address:

708 N.W. 2ND AVENUE
P.O. BOX 485
OKEECHOBEE, FL 34972 US

FEI Number: 59-1888979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

T.T. RUCKS
708 N.W. 2ND AVE
OKEECHOBEE, FL 34972 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: PD () Delete
Name: RUCKS, T.T.
Address: 708 N.W. 2ND AVENUE
City-St-Zip: OKEECHOBEE, FL

Title: VD () Delete
Name: BERMAN, WILLIAM
Address: 708 N.W. 2ND AVENUE
City-St-Zip: OKEECHOBEE, FL

Title: STD () Delete
Name: BUTLER, ROGER
Address: 708 N.W. 2ND AVENUE
City-St-Zip: OKEECHOBEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUCKS, T.T.
Address: 708 N.W. 2ND AVENUE
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: VD (X) Change () Addition
Name: BERMAN, WILLIAM
Address: 708 N.W. 2ND AVENUE
City-St-Zip: OKEECHOBEE, FL 34972 US

Title: STD (X) Change () Addition
Name: BUTLER, ROGER
Address: 708 N.W. 2ND AVENUE
City-St-Zip: OKEECHOBEE, FL 34972 US

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: T.T. RUCKS

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date