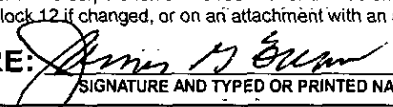


# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90006 031 \*\*\*150.00

<b>DOCUMENT #</b> <span style="font-size: 1.5em;">F9500004244</span>			
<b>1. Entity Name</b> <b>TYSON FARMS, INC.</b>			
<b>Principal Place of Business</b>		<b>Mailing Address</b>	
<b>2. Principal Place of Business</b> <b>2210 W. OAKLAWN DR.</b>		<b>3. Mailing Address</b> <b>PO BOX 2020</b>	
Suite, Apt. #, etc. <b>CP131 TAX ACCTG</b>		Suite, Apt. #, etc. <b>CP131 TAX ACCTG</b>	
<b>City &amp; State</b> <b>SPRINGDALE AR</b>		<b>City &amp; State</b> <b>SPRINGDALE AR</b>	
<b>Zip</b> <b>72762</b>	<b>Country</b> <b>US</b>	<b>Zip</b> <b>72765</b>	<b>Country</b> <b>US</b>
<b>4. FEI Number</b> <b>56-0754148</b>		<input checked="" type="checkbox"/> <b>Applied For</b> <input type="checkbox"/> <b>Not Applicable</b>	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
<b>C T CORPORATION SYSTEM</b> <b>1200 SOUTH PINE ISLAND ROAD</b> <b>PLANTATION FL 33324</b>		<b>Name</b>	
		<b>Street Address (P.O. Box Number is Not Acceptable)</b>	
		<b>City</b> <span style="float: right;"><b>FL</b></span> <b>Zip Code</b>	
<b>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.</b>			
<b>SIGNATURE</b> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) <b>DATE</b>			
<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> <input type="checkbox"/> (See criteria on back)		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	
<b>10. Election Campaign Financing - Trust Fund Contribution.</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>11. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Delete</b>	
<b>STREET ADDRESS</b>	<b>2210 W. OAKLAWN DR. CP131</b>		
<b>CITY - ST - ZIP</b>	<b>SPRINGDALE AR 72762</b>		
<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Delete</b>	
<b>STREET ADDRESS</b>	<b>2210 W. OAKLAWN DR. CP131</b>		
<b>CITY - ST - ZIP</b>	<b>SPRINGDALE AR 72762</b>		
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<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Delete</b>	
<b>STREET ADDRESS</b>	<b>2210 W. OAKLAWN DR. CP131</b>		
<b>CITY - ST - ZIP</b>	<b>SPRINGDALE AR 72762</b>		
<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Change</b>	<input type="checkbox"/> <b>Addition</b>
<b>STREET ADDRESS</b>			
<b>CITY - ST - ZIP</b>			
<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Change</b>	<input type="checkbox"/> <b>Addition</b>
<b>STREET ADDRESS</b>			
<b>CITY - ST - ZIP</b>			
<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Change</b>	<input type="checkbox"/> <b>Addition</b>
<b>STREET ADDRESS</b>			
<b>CITY - ST - ZIP</b>			
<b>TITLE</b>	<b>NAME</b>	<input type="checkbox"/> <b>Change</b>	<input type="checkbox"/> <b>Addition</b>
<b>STREET ADDRESS</b>			
<b>CITY - ST - ZIP</b>			
<b>13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.</b>			
<b>SIGNATURE:</b> 		<b>JAMES G. ENNIS, VP/CONTR/CAO</b>	
<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>		<b>Date</b>	<b>Daytime Phone #</b>
		<b>04/04/00</b>	<b>501-290-4000</b>

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**TYSON FARMS, INC.**  
**Officers and Directors of the Corporation**  
**on May 7, 1999 were as follows**

<b><u>Title</u></b>	<b><u>Name</u></b>	<b><u>Business Address</u></b>
Chairman of the Board of Directors	John H. Tyson	2210 W. Oaklawn, Springdale, AR 72762
Chief Executive Officer	L. Wayne Britt	2210 W. Oaklawn, Springdale, AR 72762
President and Chief Operating Officer	Donald E. Wray	2210 W. Oaklawn, Springdale, AR 72762
Executive Vice President and Chief Financial Officer	Steven Hankins	2210 W. Oaklawn, Springdale, AR 72762
Executive Vice President	Les Baledge	2210 W. Oaklawn, Springdale, AR 72762
Senior Vice President, Finance and Treasurer	Dennis Leatherby	2210 W. Oaklawn, Springdale, AR 72762
Vice President, Controller, and Chief Accounting Officer	James G. Ennis	2210 W. Oaklawn, Springdale, AR 72762
Vice President and Director of Legal Services	David Van Bebber	2210 W. Oaklawn, Springdale, AR 72762
Secretary	R. Read Hudson	2210 W. Oaklawn, Springdale, AR 72762
Assistant Secretary	Louis C. Gottsponer, Jr.	2210 W. Oaklawn, Springdale, AR 72762

**DIRECTORS**

Senior Chairman of the Board	Don Tyson	2210 W. Oaklawn, Springdale, AR 72762
Chairman of the Board	John Tyson	2210 W. Oaklawn, Springdale, AR 72762
Director	Donald E. Wray	2210 W. Oaklawn, Springdale, AR 72762