

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90012 007 ***150.00

0601125

DOCUMENT # F95000004244

1. Entity Name

TYSON FARMS, INC.

Principal Place of Business

TYSON FARMS, INC.
2210 OAKLAWN DRIVE
SPRINGDALE AR 72765-2020
US

Mailing Address

TYSON FARMS, INC.
2210 OAKLAWN DRIVE
SPRINGDALE AR 72765-2020
US

2. Principal Place of Business

3. Mailing Address

TYSON FARMS INC

Suite, Apt. #, etc.

Suite, Apt. #, etc.

PO BOX 2020 CP131

City & State

City & State

SPRINGDALE AR 72765-2020

Zip

Country

Zip

Country

4. FEI Number

56-0754148

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVFT
LEATHERBY, DENNIS
2210 W. OAKLAWN DRIVE
SPRINGDALE AR 72765-2020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CPCE
TYSON, JOHN H.
2210 W. OAKLAWN CP131
SPRINGDALE AR 72762 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVFO
HANKINS, STEVEN
2210 W. OAKLAWN DRIVE
SPRINGDALE AR 72765-2020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COO
LEE, GREG
2210 W. OAKLAWN CP131
SPRINGDALE AR 72762 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COBD
TYSON, JOHN
2210 W. OAKLAWN DRIVE
SPRINGDALE AR 72765-2020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP/CFO
STEVEN HANKINS
2210 W. OAKLAWN CP131
SPRINGDALE AR 72762 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
BRITT, WAYNE
2210 W. OAKLAWN DRIVE
SPRINGDALE AR 72765-2020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HUDSON, R. READ
2210 W. OAKLAWN CP131
SPRINGDALE AR 72762 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
TYSON, DON
2210 W. OAKLAWN DRIVE
SPRINGDALE AR 72765-2020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVT
LEATHERBY, DENNIS
2210 W. OAKLAWN CP131
SPRINGDALE AR 72762 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
POOD
WRAY, DONALD E
2210 W. OAKLAWN DRIVE
SPRINGDALE AR 72765-2020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PLESS, RODNEY S.
2210 W. OAKLAWN CP131
SPRINGDALE AR 72762 ☒ Change ☐ Addition

13. 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 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.

SIGNATURE:

RODNEY S. PLESS, VP/CONTROLLER

01/17/01 501-290-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)