

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 20, 1999 8:00 am
Secretary of State

02-20-1999 90100 027 ***150.00

DOCUMENT # G79227

1. Corporation Name

J. K. CATTLE CO., INC.

Principal Place of Business

1238 PLACID DRIVE
LAKE PLACID FL 33852
US

Mailing Address

P.O. BOX 2208
LAKE PLACID FL 33852
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/18/1984

4. FEI Number

59-2376231

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

KNIGHT, JACK A.
1238 PLACID DRIVE
LAKE PLACID FL 33852

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jack A. Knight

PLES.

2-5-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☐ DELETE

NAME PD
KNIGHT, JACK A.
STREET ADDRESS 1238 PLACID DRIVE
CITY-ST-ZIP LAKE PLACID FL

13. 1.1 TITLE ☐ Change ☐ Addition

NAME D
KNIGHT, MARIA H.
STREET ADDRESS 1238 PLACID DRIVE
CITY-ST-ZIP LAKE PLACID FL

14. 1.2 NAME ☐ Change ☐ Addition

15. 1.3 STREET ADDRESS ☐ Change ☐ Addition

16. 1.4 CITY-ST-ZIP ☐ Change ☐ Addition

17. 2.1 TITLE ☐ Change ☐ Addition

18. 2.2 NAME ☐ Change ☐ Addition

19. 2.3 STREET ADDRESS ☐ Change ☐ Addition

20. 2.4 CITY-ST-ZIP ☐ Change ☐ Addition

21. 3.1 TITLE ☐ Change ☐ Addition

22. 3.2 NAME ☐ Change ☐ Addition

23. 3.3 STREET ADDRESS ☐ Change ☐ Addition

24. 3.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jack A. Knight
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JACK A. KNIGHT

2-5-99

Date

941-465-5664

Daytime Phone #

CR2E034 (11/98)

0437317