2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008
Secretary of State

DOCUMENT# N06000010067

Entity Name: POLK COUNTY CATTLEMEN'S ASSOCIATION, INC.

Current Principal Place of Business:

1702 HWY. 17
SOUTH BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 9005, DRAWER H503
BARTOW, FL 33831

New Mailing Address:

FEI Number: 59-2355584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MORRELL, EDUARDO F ESQ.
187 LAKE MORTON DR.
LAKELAND, FL 33801 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: ALLEN, JIMMY
Address: 1702 HWY. 17
City-St-Zip: SOUTH BARTOW, FL 33830

Title: VD ( ) Delete
Name: WATERS, NED
Address: 1702 HWY. 17
City-St-Zip: SOUTH BARTOW, FL 33830

Title: TD ( ) Delete
Name: CLARK, CHARLES
Address: 1702 HWY. 17
City-St-Zip: SOUTH BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WATERS, NED
Address: 1702 HWY. 17
City-St-Zip: SOUTH BARTOW, FL 33830

Title: VD (X) Change ( ) Addition
Name: PERSING, RICHARD
Address: 1702 HWY. 17
City-St-Zip: SOUTH BARTOW, FL 33830

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CHARLES CLARK TREA 07/10/2008

Electronic Signature of Signing Officer or Director — Date