

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010067

FILED  
Mar 05, 2012  
Secretary of State

**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:**

1702 HWY. 17 SOUTH  
BARTOW, FL 33830

**Current Mailing Address:**

1702 HWY. 17  
SOUTH BARTOW, FL 33830

**New Mailing Address:**

1702 HWY. 17 SOUTH  
BARTOW, FL 33830

**FEI Number:** 59-2355584

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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: PRES  
Name: CLARK, CHARLES  
Address: 1702 HWY. 17 SOUTH  
City-St-Zip: BARTOW, FL 33830

Title: VP  
Name: TOMKOW, DAVID  
Address: 1702 HWY. 17 SOUTH  
City-St-Zip: BARTOW, FL 33830

Title: TRES  
Name: BUNCH, JUSTIN  
Address: 1702 HWY. 17 SOUTH  
City-St-Zip: BARTOW, FL 33830

I hereby 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 all other like empowered.

**SIGNATURE:** JUSTIN BUNCH

TRES

03/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date