## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # N06353**

MIDDLEBURG FL 32068

CITY-ST-7IP

1. Entity Name

CLAY COUNTY CATTLEMEN'S ASSOCIATION, INC.

		DIATION, INC.	WE ST	15 P				
Principal Place of Business C/O JESSE GODBOLD 205 PARK ST GREEN COVE SPRINGS FL 32043 US		Mailing Address C/O JESSE GODBOLD 205 PARK ST GREEN COVE SPRINGS FL US	32043	1:10)(0)	I) BBJJA BJJAB JJJAJ BJJAG JJJJ BJAJJ BJ	Bji siði: Didii di	<b>3</b> 11 01011 1781	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKIN	G CHANGES	3	
City & State		City & State		4. FEI Number	4. FEI Number <b>59-2501675</b> Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate of	of Status Desired	\$8.75 Ac	lditional	
	6. Name and Address of Current	Registered Agent		7 Name and /	Address of New Registered	Fee Require	ea	
			Name	7. Name and 7	duress of New Registered	Agent	·	
GODBOLD, JESSE 205 PARK STREET GREEN COVE SPRINGS FL 32043		Street Address		dress (P.O. Box Number	(P.O. Box Number is Not Acceptable)			
GREEN	COVE SPRINGS FL 32043						i	
			City		FL	Zip Coc	le	
8. The abov	ve named entity submits this statement fo	r the purpose of changing its	registered office or re	egistered agent, or both			and accept	
the obliga	ations of registered agent.					rammar tricit,	and aboupt	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signature	required when reinstating)	DATE		<del></del>	
					DATE			
		<b>6</b> Floring 6						
	FILE NOW: FEE IS \$61,25	Trust Fund Co	npaign Financing ontribution.	\$5.00 May Be Added to Fees	Make Chec Florida Depar	k Payable tment of S	to State	
10.	OFFICERS AND DIF	Trust Fund Co		Added to Fees	Florida Depar	tment of	State	
TITLE	OFFICERS AND DIF	Trust Fund Co	ontribution.	Added to Fees	Make Check Florida Depar	tment of	State	
TITLE	OFFICERS AND DIF ROGERS, JONATHAN	Trust Fund Co	ontribution.	Added to Fees	Florida Depar	tment of	State	
TITLE NAME STREET ADDRESS	OFFICERS AND DIF ROGERS, JONATHAN 5302 SHARRON RD	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida Depar	tment of	State	
TITLE NAME STREET ADDRESS CITY-SYZIP	D ROGERS, JONATHAN 5302 SHARRON RD GREEN COVE SPRINGS FL 32043	Trust Fund Ca	11. TITLE NAME	Added to Fees	Florida Depar	tment of	State	
NAME STREET ADDRESS CITY-ST-ZIP	D ROGERS, JONATHAN 5302 SHARRON RD GREEN COVE SPRINGS FL 32043	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Florida Depar	tment of	State	
TITLE NAME STREET ADDRESS CITY-SY, ZIP TITLE NAME	OFFICERS AND DIF D ROGERS, JONATHAN 5302 SHARRON RD GREEN COVE SPRINGS FL 32043 D STARLING, HORCE	Trust Fund Ca	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Florida Depar	RECTORS IN Change	State  I 10  Addition	
NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS	D ROGERS, JONATHAN 5302 SHARRON RD GREEN COVE SPRINGS FL 32043 D STARLING, HORCE 5676 CARRIBEAN CIR	Trust Fund Ca	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Florida Depar	RECTORS IN Change	State  I 10  Addition	
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12. I hereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

**FILED** 

01-13-2003 90469 024 \*\*\*\*61.25

Jan 13, 2003 8:00 am Secretary of State