2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34962

Entity Name: FLORIDA MEAT GOAT ASSOCIATION, INC.

FILED May 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9210 NW 59 ST. 1734 CR 227A

ALACHUA MISSING PINES FARM OXFORD, FL 34484 US

GAINESVILLE, FL 32653 US

Current Mailing Address: New Mailing Address:

9210 NW 59 ST 1734 CR 227A

GAINESVILLE, FL 32653 US OXFORD, FL 34484 US

FEI Number: 61-1475051 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: Name and Address of New Registered Agent:

CARPENTER, RONALD A. DIANE STRICKLAND 4127 NW 27TH LANE DIANE STRICKLAND 1734 CR 227A

GAINESVILLE, FL 32653 US OXFORD, FL 34484 US

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: DIANE STRICKLAND 05/29/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DV () Delete Title: P (X) Change () Addition

 Name:
 STRICKLAND, DIANE
 Name:
 HILL, HELEN

 Address:
 1734 CR 227 A
 Address:
 6378 S.W. CR-791,

City-St-Zip: OXFORD, FL 34484 City-St-Zip: LAKE BUTLER, FL 32054 US

Title: DT () Delete Title: VP (X) Change () Addition

 Name:
 GORMAN, THOMAS A
 Name:
 VANHORN, JOHN A

 Address:
 9210 NW 59 ST
 Address:
 P.O. BOX 1476

City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: SORRENTO, FL 32776 US

Title: DP () Delete Title: S (X) Change () Addition Name: ESSECK, RICHARD Name: LUCAS, JOANNE

 Name:
 ESSECK, RICHARD
 Name:
 LOCAS, JOANNE

 Address:
 4760 NW 55 ST
 Address:
 20014 NW 262ND AV

 City-St-Zip:
 BELL, FL 32619
 City-St-Zip:
 HIGH SPRINGA, FL 32643

 $\label{eq:title:definition} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{T} \qquad \mbox{(X) Change () Addition}$

 Name:
 VAN HOAN, JOHN
 Name:
 GORMAN, TOM

 Address:
 P.O. BOX 1476
 Address:
 9210 NW 59TH ST

 City-St-Zip:
 SORRENTO, FL 32776
 City-St-Zip:
 GAINESVILLE, FL 32653

 Name:
 ADRI, PRETÒRIOUS
 Name:
 EZENWA, IKÈ

 Address:
 P.O. BOX 867
 Address:
 2686 SR 29 N

City-St-Zip: CHIEFLAND, FL 32644 City-St-Zip: IMMOKALLEE, FL 34142

I hereby certify that the information supplied with this filing does not qualify for the 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: DIANE STRICKLAND T 05/29/2006