

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90032 038 ****70.00

DOCUMENT # N40042

1. Entity Name

HILLSBOROUGH COUNTY CATTLEMEN'S ASSOCIATION, INC



Principal Place of Business

4203 W PEACOCK RD
PLANT CITY FL 33566

Mailing Address

4203 W PEACOCK RD
PLANT CITY FL 33566

2. Principal Place of Business - No P.O. Box #

6404 ST. RD. 39 S.

3. Mailing Address

4203 W PEACOCK RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PLANT CITY FL

City & State

PLANT CITY, FL.

Zip

33565

Country

HILLSBOROUGH

Zip

33565

Country

HILLSBOROUGH

6. Name and Address of Current Registered Agent

PEACOCK, ALLEN D
4203 PEACOCK RD
PLANT CITY FL 33565

4. FEI Number

59-3135653

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P
NAME LAYTON, RONALD ☐ Delete
STREET ADDRESS 17217 OWEN RD.
CITY-ST-ZIP WIMAUMA FL 33598

TITLE VD
NAME BENNETT, LARRY ☐ Delete
STREET ADDRESS 8525 WLINEBAUGH AVE.
CITY-ST-ZIP TAMPA FL

TITLE D
NAME JOHNSON, DONALD ☐ Delete
STREET ADDRESS 2202 W KEYSVILLE RD
CITY-ST-ZIP PLANT CITY FL 33567

TITLE D
NAME GUYNN, LAYTON ☐ Delete
STREET ADDRESS 17217 OWENS RD
CITY-ST-ZIP WIMAUMA FL 33598

TITLE D
NAME PEACOCK, ALIEN D ☐ Delete
STREET ADDRESS 4203 W PEACOCK RD.
CITY-ST-ZIP PLANT CITY FL 33565

TITLE DT
NAME GRIFFIN, JAMES ☐ Delete
STREET ADDRESS 3120 BLOUND RD
CITY-ST-ZIP DOVER FL 33527

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: Allen D Peacock ALIEN D. PEACOCK 3/18/08 813-752-1305