

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50377

FILED  
Aug 25, 2007  
Secretary of State

**Entity Name:** LABELLE FAMILY LIVESTOCK CLUB, INC.

**Current Principal Place of Business:**

LA BELLE RODEO GROUNDS  
HIGHWAY 29 SOUTH  
LA BELLE, FL 33935 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 2772  
LA BELLE, FL 33975 US

**New Mailing Address:**

**FEI Number:** 65-0370510 **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:**

TINDALL, ANDREA  
2375 CASE RD  
LABELLE, FL 33935 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: P ( ) Delete  
Name: ROSBOUGH, SHERRI  
Address: 750 EVANS RD  
City-St-Zip: LABELLE, FL 33935

Title: V ( ) Delete  
Name: EDGAR, CARRIE G  
Address: 2830 MURRAY RD  
City-St-Zip: ALVA, FL 33920

Title: S ( ) Delete  
Name: ARCHER, BUFFY L  
Address: 1150 TOM COKER RD SW  
City-St-Zip: LABELLE, FL 33935

Title: T ( ) Delete  
Name: TINDALL, ANDREA  
Address: 2375 CASE ROAD  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: WILLIAMS, GARY  
Address: 17400 ASPEN BLVD  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: ARCHER, ROBBIE  
Address: 1150 TOM COKER RD SW  
City-St-Zip: LABELLE, FL 33935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: ANDREA TINDALL

T

08/25/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date