


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # N96000005009	
1. Entity Name WEST FLORIDA LIVESTOCK ASSOCIATION INC.	

Principal Place of Business 2140 W. JEFFERSON STREET QUINCY, FL 32351	Mailing Address 2140 W. JEFFERSON STREET QUINCY, FL 32351
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DO NOT WRITE IN THIS SPACE



04202007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3408389	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GRANT, HENRY G 2140 W JEFFERSON ST QUINCY, FL 32351

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEWIS, MITCH 5829 MT. PLEASANT RD. QUINCY, FL 32352
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRANT, HENRY 2140 W. JEFFERSON ST. QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POUCHER, AL 1720 TELOGIA CREEK RD QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VANLANDINGHAM, BILLY 519 TELOGIA CREEK RD. QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, LYNN 49 COX LANE QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, GERARD 4801 MT PLEASANT RD QUINCY, FL 32351

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U00000725167
05/03/07-80011-014 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Henry G. Grant **4/26/07 (850) 886-7255**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #