11-03 2003

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

FILED

03 APR -1 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000005684

1. Entity Name

HEREFORD ASSOCIATION OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

800015180028
04/02/03--01058--029 **183.75

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2. Principal Place of Business	3. Mailing Address
1210 HIGHLANDS DRIVE	P.O. BOX 1931
Suite, Apt. #, etc. NO MAIL BOX	Suite, Apt. #, etc.
City & State LAKE PLACID FLORIDA	City & State LAKE PLACID FLORIDA
Zip 33852 Country HIGHLANDS	Zip 33862 Country HIGHLANDS

4. FEI Number 650835751 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name SARAH K. CHILDS

Street Address (P.O. Box Number is Not Acceptable) 1210 HIGHLANDS DR. (NO MAIL BOX)

PO BOX 1931 (MAIL DELIVERY)

City LAKE PLACID FL Zip Code 33862

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 SARAH K. CHILDS Sarah K. Childs 20 MAR 03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

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	PRESIDENT
NAME	SARAH K. CHILDS
STREET ADDRESS	P.O. BOX 1931
CITY-ST-ZIP	LAKE PLACID FLORIDA 33862
TITLE	VICE PRESIDENT
NAME	SALLY PUTNAM
STREET ADDRESS	1200 HIGHLANDS DRIVE
CITY-ST-ZIP	LAKE PLACID FLORIDA 33852
TITLE	SECRETARY
NAME	SID SUMNER
STREET ADDRESS	399 WEST TYLER STREET
CITY-ST-ZIP	BARTOW FLORIDA 33830
TITLE	DIRECTOR
NAME	BOBBY CHAMBLISS
STREET ADDRESS	1425 GRADES HWY
CITY-ST-ZIP	DAWSON GA. 31742
TITLE	DIRECTOR
NAME	GEORGE ASQUE
STREET ADDRESS	R.R. BOX 89.
CITY-ST-ZIP	CEDAR BLUFF VA. 24609
TITLE	DIRECTOR
NAME	MARK SHORE
STREET ADDRESS	RR #1 BOX 331
CITY-ST-ZIP	WALNUT COVE NC 27052

TITLE	
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CITY-ST-ZIP	

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CR2E037B (12/02)

12. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Sarah K. Childs 20 MAR 03 863-465-5729
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SARAH K. CHILDS

jr 4/1

Attachment ##

March 14, 2003 N97000005684

Dear Sir,

I am enclosing three Not for Profit Corporation Uniform Business Reports - one each for year 2001, 2002 and 2003. I did not receive the annual report forms thus we were neglected in filing.

I have enclosed a check for each of the three years for a total of $183.75.

Should you need to contact me I can be reached at (863) 441-0105.

Sincerely,
Sarah H. Childs
President Hereford Association of Florida