2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000087261

Entity Name

MANATEE VALLEY CATTLE, INC.



FILED Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90067 034 ***150.00

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Principal Place of Business 1227 9TH AVENUE WEST BRADENTON FL 34205			Mailing Address 1227 9TH AVENUE WEST BRADENTON FL 34205				·				
2. Principal Place of Business			3. Mailing Address				*				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State				4. FEI Number 65-1044849]
Country		Zip	Zip		Country		Certificate of Status Desired		8.75 Ad	ditional	٦.,
6. Name and Address of Current			Registered Agent			7. Name and Address of New Registered Agent					
IOHN B II	1	-		-	Name		,				7
,			Street Addres			ss (P.O. I	(P.O. Box Number is Not Acceptable)				
	***					11.7					1
					City			FL	Zip Cod	le	7
named entit ons of regist	y submits this statement f	or the purp	oose of changing its	register	ed office or regi	stered aç	gent, or both, in the State of Florida	a. I am fa	miliar with	, and accept	
	X					•••					
Signature, typed	or printed name of registered agen	t and title if app	olicable. (NOTE	: Registere	d Agent signature req	uired when r	reinstating)	DATE			
May 1, 200	3 Fee will be \$550.00						Election Campaign Financ Trust Fund Contribution.	ing 🗆			
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Den	OFFICERS AND	DIRECTO				ΑŒ	ODITIONS/CHANGES TO OFFICE				؍ ا−
HARLLEE, JOHN P III 1227 9TH AVENUE WEST			NAME Street		ET ADDRESS		-		Change	∐ Addition	0,017
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	AUE WEST L 34205 lace of Busin #, etc. 6. Name JOHN P II AVENUE V ON FL 3422 named entit ons of regist Kignature, typed LE NOW!! May 1, 200 Payable to PSD HARILEE, 1227 9TH BRADENT	AUE WEST EL 34205 ace of Business	NUE WEST EL 34205 BRAE JACOB BUSINESS J. Ma #, etc. Country Country JOHN P III AVENUE WEST ON FL 34205 Paramed entity submits this statement for the purpons of registered agent. Signature, typed or printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applications of the printed name of registered agent and title if applicatio	NUE WEST PL 34205 Ince of Business #, etc. City & State Country Zip 6. Name and Address of Current Registered Agent JOHN P III AVENUE WEST ON FL 34205 DN FL 34205 Signature, typed of printed name of registered agent and title if applicable. (NOTE LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State OFFICERS AND DIRECTORS PSD HARILEE, JOHN P III 1227 9TH AVENUE WEST BRADENTON FL 34205 Delete Delete	NUE WEST it 34205 1227 5TH AVENUE WEST BRADENTON FL 34205 2	Maliting Address NUE WEST 1237 9TH AVENUE WEST BRADENTON FL 34205 acc of Business	Mailing Address NUE WEST 127 9TH AVENUE WEST BRADENTON FL 34205 Avenue west Avenue west Bradent Avenue west	Mailing Address NUE WEST 127 STH AVENUE WEST BRADENTON FL 34005 Bace of Business 3. Mailing Address #, etc. Suitg, Apr. #, etc. City & State Country Zip Country Zip Country S. Certificate of Status Desired 4. FEI Number 65-1044849 S. Certificate of Status Desired 7. Name and Address of New Regi Name Street Address (P.O. Box Number is Not Acceptable) DITH AVENUE WEST IN FL 34205 DITH AVENUE WEST IN FL 34205 DITH CITY CITY CITY CITY CITY DITH AVENUE WEST IN FL 34205 DITH AVENUE WEST DITH AVENUE WEST IN FL 34205 DITH AVENUE WEST DITH AVENUE WEST DITH AVENUE WEST DITH ADDITIONS/CHANGES TO OFFICE IN FL MAKE SITIET ADDITIONS/CHANGES CITY-ST-2P Delete TILE MAKE SITIET ADDITIONS/CHANGES CITY-ST-2P DELETE TO ADDITIONS/CHANGES CITY-ST-2P TO ADDITIONS/CHANGES CITY-ST-2P TO ADDITIONS/CHANGES CITY-ST-2P	Note that the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am to one of registered agent. Note that the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am to one of registered agent. Note that the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am to one of registered agent, or both, in the State of Florida. 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2. 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: Flurther 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 receiper or trustee emptywered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes and that my name appears in Block 10 or Block 11 if the first florida Statutes and that my name appears in Block 10 or Block 11 if the first florida Statutes and that my name appears in Block 10 or Block 11 if the first florida Statutes and that my name appears in Block 10 or Block 11 if the first florida Statutes and that my name appears in Block 10 or Block 11 if the first florida Statutes and that my name appears in Block 10 or Block 11 if the first florida Statutes and the florida Statutes and the first florida Statutes and the first florida Statutes and the florida Statutes and the first florida Statutes and the florida Statutes and the florida Statutes and the

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date