

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000024648

FILED
Jun 29, 2006
Secretary of State

Entity Name: LIVESTOCK DISPOSAL SERVICE, INC.

Current Principal Place of Business:

441 STATE ROAD 64 EAST
ZOLFO SPRINGS, FL 33890

New Principal Place of Business:

Current Mailing Address:

DRAWER E
ALMA, GA 31510

New Mailing Address:

FEI Number: 20-2414852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHISM,, LORIE L
4454 PINEY ISLAND COURT
FERNANDINA BEACH, FL 32034 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: DPST () Delete
Name: LEE, DENNEY C
Address: 231 WEST 12TH STREET
City-St-Zip: ALMA, GA 31510

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRE () Change (X) Addition
Name: MCCLURG, LEW
Address: 815 STATE ROAD 64 EAST
City-St-Zip: ZOLFO SPRINGS, FL 33890

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNEY C. LEE

DPST

06/29/2006

Electronic Signature of Signing Officer or Director

Date