2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000115329

1. Entity Name

RANCHERS AND FARMERS GENERAL AGENCY, INC.



FILED Feb 13, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2610 SWEETGUM LANE BEAUMONT, TX 77703

P.O. BOX 3730 BEAUMONT, TX 77704-3730

01112007 No Chg-P

CR2E034 (11/05)

4. FEI Number 20-3422359 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or re	egistered agent, c	or both, in the State of Florida. 1 am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered A				required when reinstatin	g) DATE
FILE NOWII! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			ncing	\$5.00 May B Added to Fees	е
10.	OFFICERS AND DIREC	CTORS	,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHIPLEY, WESLEY W 2610 SWEETGUM BEAUMONT, TX 777034926		· ;		U00000634445 02/22/07-80010-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MAY, JAMES A 2610 SWEETGUM BEAUMONT, TX 777034926		, d	e esper	02/22/01-80010-011 150.00
TITLE NAME Street address City-St-Zip	V TED, MOOR E III 1245 NOTTINGHAM BEAUMONT, TX 77706			D	O NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				., IN	I THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP	pertify that the information conclude with this fe	lung dags not qualify for the average	, , ,	tained in Cheste	r 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an applyass, with all other like empoyared.