

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P25386

1. Entity Name

DELTA AND PINE LAND COMPANY

**FILED**  
**Feb 26, 2000 8:00 am**  
**Secretary of State**

02-26-2000 90012 037 \*\*\*150.00

Principal Place of Business

Mailing Address

100 MAIN STREET  
P.O. BOX 157  
SCOTT MS 38772

100 MAIN STREET  
P.O. BOX 157  
SCOTT MS 38772-0157

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

62-1040440

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete
P	ROBINSON, F.M.	100 MAIN ST.	SCOTT MS	
VP	JAGODINSKI, W T	100 MAIN ST.	SCOTT MS	<input type="checkbox"/> Delete
VP	KIMMEL, D.L.	100 MAIN ST.	SCOTT MS	<input type="checkbox"/> Delete
VP	ELLIS III, W A	100 MAIN STREET	SCOTT MS	<input type="checkbox"/> Delete
VP	COLLINS, H.B.	100 MAIN ST.	SCOTT MS	<input type="checkbox"/> Delete
VP	DISMUKE, C.R.	100 MAIN STREET	SCOTT MS	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
SEE ATTACHED LISTING FOR ALL CORPORATE OFFICERS + DIRECTORS				
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W.T. Jagodinski, VP-Finance 1/12/2000 (662) 742-4200

Date

Daytime Phone #

CR2E034 (9/99)