

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000084222

FILED  
May 05, 2008  
Secretary of State

Entity Name: GUDE FAMILY CATTLE CO.

## Current Principal Place of Business:

16345 JESSAMINE RD.  
DADE CITY, FL 33523

## New Principal Place of Business:

## Current Mailing Address:

16345 JESSAMINE RD.  
DADE CITY, FL 33523

## New Mailing Address:

FEI Number: 59-3213445

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUDE, WALTER F  
16365 JESSAMINE RD.  
DADE CITY, FL 33523 US

## Name and Address of New Registered Agent:

NEWLON, JONATHAN W  
12146 CURLEY STREET  
SAN ANTONIO, FL 33576 US

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: JONATHAN W. NEWLON

05/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GUDE, WALTER F  
Address: 16343 JESSAMINE RD  
City-St-Zip: DADE CITY, FL 33523

Title: SD ( ) Delete  
Name: GUDE, ALICE H  
Address: 16345 JESSAMINE RD  
City-St-Zip: DADE CITY, FL 33523

Title: VPD (X) Delete  
Name: GUDE, WALTER C  
Address: 16265 JESSAMINE RD  
City-St-Zip: DADE CITY, FL 33523

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GUDE, WALTER C  
Address: 16265 JESSAMINE RD  
City-St-Zip: DADE CITY, FL 33523

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ALICE H. GUDE

VD

05/05/2008

Electronic Signature of Signing Officer or Director

Date