

\$400.00

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

APPROVED
AND
FILED

pg. 1 of 2

96 DEC -9 AM 7:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1995-1996	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000031682

1. Corporation Name
Country Feed & Supply, Inc.

Principal Place of Business Mailing Address

1852 NW 9th Street
Okeechobee, FL 34972

3. Date Incorporated or Qualified 4-20-94	3a. Date of Last Report
4. FEI Number 65-0501857	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

Jeffery S. Watford
16550 NW 144th Ave
Okeechobee, FL 34972

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	President
NAME	Jeffery S. Watford
STREET ADDRESS	16550 NW 144th Ave
CITY - ST - ZIP	Okeechobee FL 34972
TITLE	Secretary
NAME	Angela J. Watford
STREET ADDRESS	16550 NW 144th Ave
CITY - ST - ZIP	Okeechobee FL 34972
TITLE	V. President
NAME	Cole Watford
STREET ADDRESS	16550 NW 144th Ave
CITY - ST - ZIP	Okeechobee FL 34972
TITLE	Treasurer
NAME	Lee Watford
STREET ADDRESS	16550 NW 144th Ave
CITY - ST - ZIP	Okeechobee FL 34972
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	000002026540--1
2.3 STREET ADDRESS	-12/11/96--01086--007
2.4 CITY - ST - ZIP	****400.00 ****200.00
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	200002026542--5
3.3 STREET ADDRESS	-12/11/96--01086--007
3.4 CITY - ST - ZIP	****400.00 ****200.00
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Reinstatement Fee waived
5.3 STREET ADDRESS	Notice Not Received!
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	SPT
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR


Cole Watford 12/5/96 941-763-3447

Date

Daytime Phone #

CR2E034 (3/96)

COUNTRY FEED & SUPPLY, INC.

1852 N.W. 9th Street  Okeechobee, Florida 34972

PHONE: (813) 763-3447

FAX: (813) 763-5205

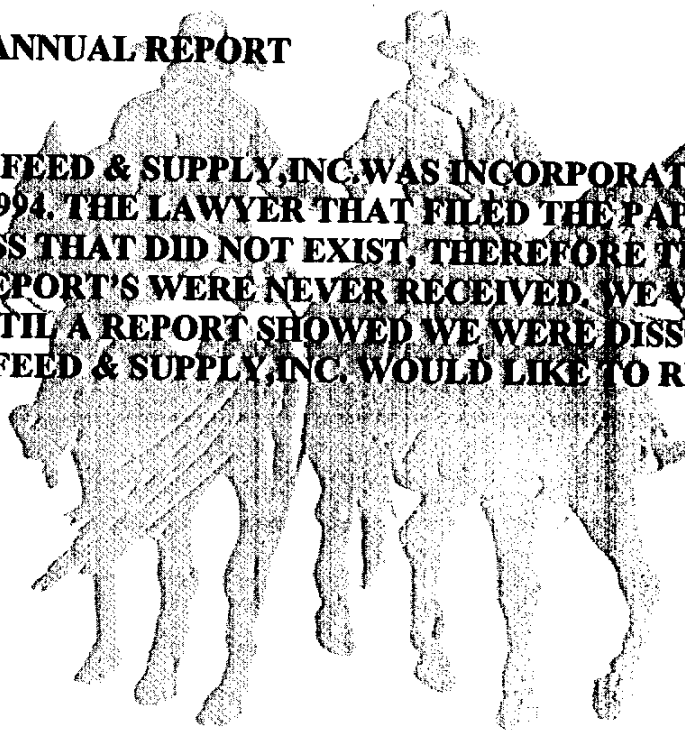
TO: FLORIDA DEPARTMENT OF STATE

FROM: VICKI HARE

DATE: DECEMBER 5, 1996

SUBJECT: ANNUAL REPORT

COUNTRY FEED & SUPPLY, INC. WAS INCORPORATED ON APRIL 20, 1994. THE LAWYER THAT FILED THE PAPER'S USED AN ADDRESS THAT DID NOT EXIST. THEREFORE THE ANNUAL REPORT'S WERE NEVER RECEIVED. WE WERE NOT AWARE UNTIL A REPORT SHOWED WE WERE DISSOLVED. COUNTRY FEED & SUPPLY, INC. WOULD LIKE TO REINSTATE.



The Cattlemen's Company™

