FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

941-688-0611

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

3125 THORNHILL RD. WINTER HAVEN FL 33880

DOCUMENT # P95000025844 (8)

Mailing Address
3125 THORNHILL RD.

WINTER HAVEN FL 33880-5031

CRESCENT CROSS CATTLE COMPANY

							3. Date incorporated or Qualified 03/31/1995	3a. Date of Last 05/01/1996		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For		
21				26			APPLIED FOR 59-3304543 Not Applicable			
Suite, Apt. #, etc.				Suite, Apt #, etc.				ER 76	Additional	
22				27			5. Certificate of Status Desired		Required	
City & State				City & State			6. Election Campaign Financing	\$5.0	May Be	
23				28			Trust Fund Contribution Added to Fees			
Zip	Country Z _i p			Country	Country 8. This corporation has liability for intangible tax under s. 199.032,			s. 199.032,		
24	25 29 30				30	Florida Statutes				
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent 81 Name				
HAMPTON, LYNN 3125 THORNHILL RD.						81 Name				
						Street A	ddress (P.O. Box Number is Not Acceptat	mber is Not Acceptable)		
WINTER HAVEN FL 33880						83				
						ł			l l	
*•					84	City	85 Zip Code			
								FL S 2		
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 farm-liar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE	Signature, typed r	r printed name of regi	Sternet Agent and his	if applicable (NO	TF: Begistered An	ent slonature re	quired when reinstating)	DATE	·	
12.	regresses, typeste		RS AND DIRE		13,	cii wgi kito o is	ADDITIONS/CHANGES TO OFFIC		ORS IN 12	
TITLE	D			DELETE	1.1 TITLE	1		Change		
NAME	HAMPTON, LYNN					ŀ				
STREET ADDRESS	ACCRESS 3125 THORNHILL RD.				1.3 STREE	T ADDRESS				
CITY SI-ZIP					1.4 CITY-	1				
Title	D			☐ DELETE	2 1 TITLE	-	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
NAME:	HAMPTON, LEIGH				2.2 NAME					
STREET ADDRESS		RNHILL RD.				T ADDRESS				
CHY - S1 - ZIP		AVEN FL 3388	30			ST-ZIP				
THEF	1		***************************************	DELETE	3.1 TITLE			Change	e 🔲 Addition	
NAM ²					3.2 NAME	3.2 NAME				
STREET ADURESS					3.3 STREET ADDRESS					
CITY-ST ZIF					3.4. CITY-	ST-ZIP				
TITLE	DELETE				4.1 TITLE			☐ Change	e Addition	
NAM !					4. 2 NAME					
STREET ADDRESS					4.3 STREE	T ADDRESS				
COY-\$1-20F	<u> </u>				4.4 CITY -	ST-ZIP				
litte				☐ DELETE	5.1 TITLE			Change	e 🔲 Addition	
NAME					5.2 NAME					
STREET ADDRESS					5 3 STREE	T ADDRESS	•			
Cri y - \$.1 - 7(6)					54 CITY-	ST-ZIP				
THEF				☐ DELETE	6.1 TITLE			Change	e 🔲 Addition	
NAME					6.2 NAME]				
STREET ADDRESS	1				6.3 STREE	T ADDRESS				
CITY - \$1 - ZIP	<u></u>				6.4 CITY -					
							ited in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega			
Lam an d	officer or direc	for of the corpor	ation or the rec	ceiver or trustee empo attachment with an ac	wered to exe	cute this re	port as required by Chapter 607, Florida S	Statutes; and that m	y name	