2003 FOR PROFIT CORPORATION

FILED Mar 26, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR** S07294 **DOCUMENT #** 1. Entity Name 03-26-2003 90192 004 ***150.00 RIEGER CATTLE COMPANY Principal Place of Business Mailing Address P. O. BOX 794 P. O. BOX 794 EATON PARK FL 33840 EATON PARK FL 33840 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 65-0227533 -Applied For City & State City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RIEGER, SONNY N. Street Address (P.O. Box Number is Not Acceptable) 5234 THORNHILL ROAD WINTER HAVEN FL 33880 City 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. I am familiar with, and accept Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. □ Addition TITLE ☐ Delete TITLE ☐ Change RIEGER, SONNY N. NAME NAME 3234 THORNHILL RD STREET ADDRESS STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY_ST-ZIP CITY-ST-ZIP ... Change Addition TITLE ☐ Delete NAME NAME

CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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