

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

FILED

Feb 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S20267** (8)

1. Corporation Name
DAIRYMAN'S SUPPLY CO. - FLORIDA, INC.

Principal Place of Business P O BOX 1879 WILDWOOD FL 34785	Mailing Address P O BOX 1879 WILDWOOD FL 34785
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/19/1990	
4. FEI Number 59-3039989	Applied For <input type="checkbox"/> 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" 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 Country
24	29

9. Name and Address of Current Registered Agent	
COOK, GEORGE D., JR. 2804 S JEAN AVE INVERNESS FL 32650	

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

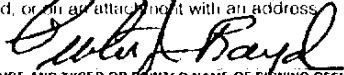
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, L. G.	
STREET ADDRESS	1700 CASEY KEY RD	
CITY - ST - ZIP	NOKOMIS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, GEORGE SR.	
STREET ADDRESS	204 ERWIN DR	
CITY - ST - ZIP	MAYFIELD KY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, JOHN E.	
STREET ADDRESS	1010 BRAND ST	
CITY - ST - ZIP	MAYFIELD KY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, NANCY C.	
STREET ADDRESS	6520 E SPEEDWAY	
CITY - ST - ZIP	TUSCON AZ	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	BOYD, CURTIS J.	
STREET ADDRESS	405 GOLF CLUB LN	
CITY - ST - ZIP	MAYFIELD KY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COOK, GREG	
STREET ADDRESS	613 E COLLEGE ST	
CITY - ST - ZIP	MAYFIELD KY	

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		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
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		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: 

12/19/98 502-295-8881

CR2E034 (10/97)