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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # \$95336

(1)

**CRACKER CATTLE COMPANY** 

FILED									
May 02 1997 8:00am									
Secretary of State									

Principal Plac 208 W ALAMO LAKELAND FL S	DR	Mailing Address PO BOX 7064 LAKELAND FL 33807-7064 US								
		•			3. Date in 11/18/	ncorporated or Quali		te of Last Re <b>4/1996</b>	eport	
2. Principal P	lace of Business	26. Mailing Address			4. FEI Nu	<u> </u>		Ap	plied For It Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				cate of Status Desired	d 🗀	\$8.75 A	Additional	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country 25	Zip 29	Country 30			orporation has liabilit Statules	· • • -	tax under s.	. 199.032,	
	9. Name and Address of Curren	Registered Agent				and Address of Ne	w Registered A	gent		
	SWORTH, W. WM JR.		81	Namo	)					
	W ALAMO DR		82 Street Ad			Idress (P.O. Box Number is Not Acceptable)				
LAKE	ELAND FL 33813				- <del> </del>					
			63							
			84	City				<b>85</b> Zip (	Code	
office or r	to the provisions of Sections 607.050; registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was at	uthorized by	the co	d corporation submi rporation's board of	its this statement for directors. I hereby	the purpose of accept the appr	changing it pintment as	s registered registered	
SIGNATURE										
10	Signature, typed or printed name of registered age			nt signatu 	re required when reinstating		DATE	DIDECTOR	10 (1) 10	
12.	OFFICERS AND	DELETE	13.		ADDITIC	ONS/CHANGES TO C		Change	Addition	
NAME	ELLSWORTH, W WM J		1.2 NAME					Change		
STREET ADDRESS	208 W ALAMO DR		1.3 STREET	ADDRECE						
CITY-ST-ZIP	LAKELAND FL		1,4 CITY - S							
TITLE		DELETE	2 1 111LE	1 - 2.01	D			Change	X Addition	
NAME			2.2 NAME		Harper. R	Robert F, II	IJ	_ ,	-24	
STREET ADDRESS			2 3 STREET	ADDRESS						
CITY-ST-ZIP			2 4 City-:	ST-ZIP		F1.	33813	3-1503		
TITLE	DELETE 3							Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			33 STREET	ADDRESS						
CITY-ST-ZIP			3.4 CITY-	51-7)P						
TITLE		☐ DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STHEE	ADDRESS						
CITY-ST-ZIP		T Server	4.4 CITY - S	1 - 7iP						
TITLE		☐ DELÉTE	5 1 TH(F					Change	Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET		1					
CITY-ST-ZIP		DELETE	5.4 CITY - 9 6.1 TITLE	i - ZIP	1		****	Change	Addition	
NAME			6.2 NAME		1			∟ ∪ onange	L Addition	
STREET ADDRESS			6.3 STREET	VUUEEGG						
CITY-ST-ZIP			64 CTY-5							
14. I do here	by certify that the information supplied	with this filing does not qualify	for the exc	mption	stated in Section 1	19.07(3)(i), Florida S	tatutes. I further	certify that	the	
Information	on indicated on this annual report or s officer or director of the corporation or in Block 12 or Block 13 //chango/l, or	uppleme <del>nt</del> al annual report is tri	ud and accu	iráte an	id that my signature	shall have the same	e legal effect as	if made un-	der oath; that	