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Mar 03 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **U00043** (3)  
1. Corporation Name  
**SOUTHEASTERN DAIRY COOPERATIVE ASSN., INC.**



Principal Place of Business <b>4400 S.W. 36TH STREET FORT LAUDERDALE FL 33314</b>	Mailing Address <b>P.O. BOX 9666 FORT LAUDERDALE FL 33310-9666 US</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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3. Date Incorporated or Qualified <b>10/11/1991</b>	
4. FEI Number <b>65-0297412</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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	

9. Name and Address of Current Registered Agent <b>KIDWELL, JACK I. 4400 S.W. 38TH STREET FORT LAUDERDALE FL 33310</b>
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10. Name and Address of New Registered Agent 81 Name <b>GEORGE H. JUNG</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>6147 SPINAKER LOOP</b> 83 84 City <b>LADY LAKE</b> FL 85 Zip Code <b>32159</b>
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE **George H. Jung**  **2/16/98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	<b>D HOBBS, JOHN</b>
STREET ADDRESS	<b>105 BLOOMING FIELD DRIVE</b>
CITY-ST-ZIP	<b>BRANDON FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>PD RUCKS, T.T. SR</b>
STREET ADDRESS	<b>220 SW 21ST STREET</b>
CITY-ST-ZIP	<b>KECHOBEE FL</b>
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	<b>STD BAUMANN, CARL</b>
STREET ADDRESS	<b>14303 ST ROSE RD</b>
CITY-ST-ZIP	<b>HIGHLAND IL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>VD PEACHY, JOHN</b>
STREET ADDRESS	<b>RT 1 BOX 333-C</b>
CITY-ST-ZIP	<b>MYAKKA CITY FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>D CLEMONS, NORMAN F</b>
STREET ADDRESS	<b>2750 TRAIL DAIRY CIR</b>
CITY-ST-ZIP	<b>N FORT MYERS FL</b>
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	<b>D PERRET, MIKE</b>
STREET ADDRESS	<b>6823 IRVIN RD.</b>
CITY-ST-ZIP	<b>CALLAHAN FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>D WRIGHT, SAM</b>
1.3 STREET ADDRESS	<b>2899 WISTERIA FARM RD.</b>
1.4 CITY-ST-ZIP	<b>GREENCOVE SPRINGS, FL 32043</b>
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>S/T/D JONES, BUCKEY</b>
2.3 STREET ADDRESS	<b>6755-A THOMPSON RD.</b>
2.4 CITY-ST-ZIP	<b>SMITHDALE, MS 39664</b>
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **T.T. Rucks, Sr.**  **2/24/98** (954) 583-3344

CR2E037 (10/97)

**ADDITIONAL OFFICERS AND DIRECTORS  
OF  
SOUTHEASTERN DAIRY COOPERATIVE ASSN., INC.  
FEI # 65-0297412**

**12. OFFICERS AND DIRECTORS**

<b>Title</b> <b>Name</b> <b>Street Address</b> <b>City-St-Zip</b>	D Thomas, Charles Route 1, Box 177 Branford, FL 32008	<input type="checkbox"/> DELETE
<b>Title</b> <b>Name</b> <b>Street Address</b> <b>City-St-Zip</b>	D Smith, Kenneth 23421 Whitman Road Brooksville, FL 34601	<input type="checkbox"/> DELETE
<b>Title</b> <b>Name</b> <b>Street Address</b> <b>City-St-Zip</b>	D Wright, P. Joseph P.O. Box 1057 Avon Park, FL 33825	<input type="checkbox"/> DELETE

Enclosure w/ Annual Report due May 1, 1998.