

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 5:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V08130** (9)

1. Corporation Name

ST. JOHN'S CATTLE AND DEVELOPMENT COMPANY, INC.

Principal Place of Business

187 SEMORAN BLVD.
FERN PARK FL 32730

Mailing Address

187 SEMORAN BLVD.
FERN PARK FL 32730

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **01/17/1992** 3a. Date of Last Report **04/21/1994**

4. FEI Number **59-3115352** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip 25 County

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 County 30

9. Name and Address of Current Registered Agent

**SLOBODA, L.G.
8701 BRADLEY CIRCLE
CLERMONT, FL 34712**

10. Name and Address of New Registered Agent

81 Name **L. G. Sloboda**
82 Street Address (P.O. Box Number is Not Acceptable) **187 Semoran Boulevard**
83
84 City **Fern Park** FL 85 Zip Code **32730**

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

L. G. Sloboda

Signature typed or printed name of registered agent and (9a) if applicable

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
D	SLOBODA, L.G.	8701 BRADLEY CIRCLE CLERMONT, FL XXX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1	2	3	4
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		187 Semoran Boulevard Fern Park, FL 32730	
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

L. G. Sloboda

L. G. Sloboda

4-11-95

1-4-07-260-1987

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #