



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 11, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V19136</b> 1. Entity Name <b>COBB CATTLE CO., INC.</b>			
Principal Place of Business <b>3836 NORTHWEST 14TH PLACE GAINESVILLE, FL 32605</b>		Mailing Address <b>3836 NORTHWEST 14TH PLACE GAINESVILLE, FL 32605</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
			
		01042007 No Chg-P CR2E034 (11/05)	
4. FEI Number <b>59-3111235</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>LAWRENCE, F. PARKER 3720 NW 43 ST. STE 101 GAINESVILLE, FL 32605</b>			
<b>DO NOT WRITE IN THIS SPACE</b>			
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 the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
		DATE <b>01/11/07-80050-004 150.00</b>	
10. OFFICERS AND DIRECTORS			
TITLE	D		
NAME	COBB, LARRY WENDELL		
STREET ADDRESS	3836 NW 14TH PLACE		
CITY-ST-ZIP	GAINESVILLE, FL		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.			
SIGNATURE: <i>Larry W. Cobb</i>		1-8-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	