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95 MAY -1 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **H80239** (7)

1. Corporation Name
H. P. CATTLE BREEDING CORP.

Principal Place of Business: **ONE SUNROOF CENTER SOUTHGATE MI 48195**
Mailing Address: **ONE HERITAGE PLACE SUITE 400 SOUTHGATE MI 48195 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/10/1985**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business: 21, 22, 23
2a. Mailing Address: 26, 27, 28
24, 25, 29, 30

4. FEI Number: **59-2595163**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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: **FL**

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: _____ (NOTE: Registered Agent signature required. Agent's name only.) DATE: _____

12. OFFICERS AND DIRECTORS
C
PRECHTER, HEINZ C.
1 HERITAGE PL., SUITE 400
SOUTHGATE MI
PT
TREADWELL, DAVID L.
1 HERITAGE PL., SUITE 400
SOUTHGATE MI
S
SZPOTEK, GERALD E.
1 HERITAGE PL., SUITE 400
SOUTHGATE MI

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Change Addition
S
Koenig, Lori E.
1 Heritage Pl., Suite 400
Southgate, MI 48195

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(3)(k), 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: _____ 5-1-95 313-246-0202
DATE: _____