

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # 325932

1. Entity Name

BLACKWATER RANCH, INC.



Principal Place of Business
38900 LAKE NORRIS RD.
EUSTIS FL 32736

Mailing Address
38900 LAKE NORRIS RD.
EUSTIS FL 32736

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1199520

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELLIS, JERRY E
38900 LAKE NORRIS RD.
EUSTIS FL 32736

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME ELLIS, JERRY E
STREET ADDRESS 38900 LAKE NORRIS RD.
CITY - ST - ZIP EUSTIS FL 32736

TITLE ☐ Change ☐ Addition
NAME 000000019004
STREET ADDRESS 01/29/04-80008-010 150.00
CITY - ST - ZIP

TITLE S ☐ Delete
NAME ELLIS, LUCY I
STREET ADDRESS 38900 LAKE NORRIS RD.
CITY - ST - ZIP EUSTIS FL 32736

TITLE ☐ Change ☐ Addition
NAME
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CITY - ST - ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. 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 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

Jerry Ellis - JERRY ELLIS

1-26-04

362-589-2379

Date

Daytime Phone #