FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 401518

(6)

SECURITY RANCHETTS, INC

	10 F			
Principal Place of Business 1435 EAGLE AVENUE EAGLE LAKE FL 33839 US	Mailing Address P.O. BOX 844 EAGLE LAKE FL 33839-0844			
		3. Date incorporated or Qualified 05/19/1972	3a. Date of Last Report 04/30/1996	
2. Principal Place of Business 21. 1435 Eagle Avenue	28. Mailing Address 26 P. O. Box 844	4. FEI Number 59-1418943	Applied Not App	
Suite, Apl. #, etc.	Suite, Apt #, etc. 27	5. Certificate of Status Desired	\$8.75 Addition	
City & State 23 Eagle Lake, Fl.	City & State 28 Eagle Lake, Fl.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fee	

9. Name and Address of Current Registered Agent PAULK, GINGER 1435 EAGLE AVENUE (P.O. BOX 844) EAGLE LAKE FL 33839

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USA

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		1 8.	Certificate bi Status Desireo	لبا	F	ee Required
1.		6.	Election Campaign Financing Trust Fund Contribution		-	5.00 May Be dded to Fees
itry US	SA	8.	This corporation has liability for Florida Statutes	intangibl X Yes	e tax ur No	nder s. 199.032,
		10.	Name and Address of New Re	gistered	Agent	
81	Name					
82	Street Addr	ess (F	O. Box Number is Not Accepta	ble)		
B3						
84	City			FI	85	Zip Code

FILED

Mar 28 1997 8:00am

Secretary of State

Applied For Not Applicable \$8.75 Additional

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

Cour

CICKISTEIDE	m familiar with, and accept the obligations of, Section (ĺ
5.C. 1711.D	Signatine, type dior printed name of regish rod agost and title if applicable	(NOTÉ: Re	igistered Agent signature requir		DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE		
THE	· —	DELETE	1.1 TITLE		Change	Addition
NAME	PAULK, ODESSA V.		1.2 NAME			
STREET ADDRESS	3005 PLANTATION ROAD SE		1.3 STREET ADDRESS			
City-St-7iP	WINTER HAVEN FL 33884		1.4 CITY - ST - ZIP			
TIFLE	, 	DELETE	2.1 TITLE		Change	Addition
NAME	PAULK, GINGER SUE		2.2 NAME			
STREET ADDRESS	1435 EAGLE AVENUE		2.3 STREET ADDRESS			
CLTY - S1 - ZUP	EAGLE LAKE FL 33839		2. 4 CITY-ST-ZIP			
THEE		DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			ļ
STREET ADDRESS			3 3 STREET ADDRESS			
CMY-ST-Z-P			3 4. CHTY-ST-ZIP			
TiTLE		_] DELETE	4.1 TITLE		☐ Change	Addition
NAME			4.2 NAME			
STHEFT ADDRESS			4.3 STREET ADORESS			
CHY-S1-ZIP			4.4 CITY-ST-ZIP			
TILLE		DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME		•	
STREET ADDRESS			5.3 STREET ADDRESS			
City-ST-ZIP			5.4 CITY - ST - ZIP	**		
TITLE] DELETE	61 TITLE		☐ Change	Addition
NAME			62 NAME	•		
STREET ADDRESS			63 STREET ADDRESS			
CITY-S1-ZP	ay cod by that the information cumpled with this filing de		6.4 CITY-ST-ZIP			

nonstance by the mormation supplied with this thing does not quality 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attachment with an address.

SIGNATURE:

Cinger Paulk, Sec. 3/25/97 (941) 293-0138