**FILED** 

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90003 042 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # H77185 I ISLAND RANCH, INC.	•			ii 41411 <b>818</b> 11 81811 81811 8282 12	41
		NA W		<u> </u>	)	l
Principal Plac		Mailing Address				
5001 SW RUCKS DAIR RD 5001 SW RUCKS DAIRY RD OKEECHOBEE FL 34974 OKEECHOBEE FL 34974						
US US			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed		
				09/20/1985		_
<del></del>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	-1-
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-1446845	Not Applicat	118
22 Suite, Apt.	#, etc.	27 Suite, Apr. #, etc.		5. Certifcate of Status Desired	Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be	-
23	•	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible	
24	25	29	0	Personal Property Tax.	☐ Yes ☐ No	
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registere	d Agent	_
DEA	BUE BUY E		81 Name			
PEARCE, ROY E. 5001 SW RUCKS DAIRY RD OKEECHOBEE FL 34974			82 Street Addr	ress (P.O. Box Number is Not Acceptable)		$\Box$
			83			
			63		·	,
			84 City	F	85 Zip Code	
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statutes	the above-named corp	poration submits this statement for the purpose	of changing its registered	t
office or r	egistered agent, or both, in the State of	of Florida. Such change was auth	horized by the corporation	on's board of directors. I hereby accept the app	ointment as registered	
			a statutes.	D. a. co 2/8/99		Ì
SIGNATURE	De Ro + Hy P Pe Signature, typed or printed name of registered agen	A R C P NOTE: R	egistered Agent signature require			
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addi	tion
NAME	PEARCE, ROY E.		1.2 NAME			
STREET ADDRESS	1		1.3 STREET ADDRESS		•	}
CITY-ST-ZIP	OKEECHOBEE FL		1.4 CITY-ST-ZIP		☐ Change ☐ Addi	ition
TITLE	VD	☐ DELETE	2.1 TITLE		□ Change □ Add	uon
NAME	PEARCE, EARL D. 5001 SW RUCKS DAIRY RD		2.2 NAME 2.3 STREET ADDRESS			. }
STREET ADDRESS	OKEECHOBEE FL		2.4 CITY-ST-ZIP			1
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addi	ition
NAME.	STRATTON, MARGARET P.		3.2 NAME		•	
STREET ADDRESS	A454 A 144 AATT   4145		3.3 STREET ADDRESS			
CITY-ST-ZIP	OKEECHOBEE FL		3.4. CITY-ST-ZIP			
TITLE	D	☐ DELETE	. 4.1 TITLE		☐ Change ☐ Addi	tion
NAME	PEARCE, DOROTHY R.		4, 2 NAME			
STREET ADDRESS	5001 SW RUCKS DAIRY RD		4.3 STREET ADDRESS			
CITY-ST-ZIP	OKEECHOBEE FL		4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	51 TITLE		Change Addi	tion
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 CITY-\$T-ZIP 6.1 TITLE		☐ Change ☐ Addi	ition
TITLE			6.2 NAME		Clearing Civing	
NAME STREET ADDRESS			6.3 STREET ADDRESS			į
1 STREET ADDITION	1		- 1			

CITY-ST-ZIP 14. 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 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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: DOROTHY R PEAR L