

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 3:43

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # V34688 (4)

1. Corporation Name
DESERET RANCHES OF FLORIDA, INC.

Principal Place of Business 13754 DESERET LANE ST CLOUD FL 34773	Mailing Address 13754 DESERET LANE ST CLOUD FL 34773
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DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified 05/08/1992	3a. Date of Last Report 12/19/1994
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	4. FEI Number 65-0370859	Applied For Not Applicable
9. Name and Address of Current Registered Agent GENHO, PAUL C 13754 DESERET LANE ST. CLOUD FL 34773		10. Name and Address of New Registered Agent	

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 when reappointing) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	GENHO, PAUL C	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13754 DESERET LANE	1.2 NAME	
STREET ADDRESS	ST CLOUD FL 34773	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE V	SPENCER, GEORGE S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13754 DESERET LANE	2.2 NAME	
STREET ADDRESS	ST CLOUD FL 34773	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE ST	COOK, KENT L	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13754 DESERET LANE	3.2 NAME	
STREET ADDRESS	ST CLOUD FL 34773	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE AS	WHIPPLE, CHARLES P	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	139 E. SOUTH TEMPLE STE. 110	4.2 NAME	
STREET ADDRESS	SALT LAKE CITY UT 84111	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE D	LAMOREAUX, ROBERT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	139 E. SOUTH TEMPLE STE. 110	5.2 NAME	
STREET ADDRESS	SALT LAKE CITY UT 84111	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE D	WILLIAMS, GREGORY L	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	712 S. OREGON AVE.	6.2 NAME	
STREET ADDRESS	TAMPA FL 33600	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 110.07(3)(j), 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.

SIGNATURE: *[Signature]* **Kent L. Cook**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR