

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H31492

FILED
Feb 10, 2017
Secretary of State
CC9677504940

Entity Name: DOC PARTIN RANCH, INC.

Current Principal Place of Business:

5355 CANOE CREEK RD
SAINT CLOUD, FL 34772

Current Mailing Address:

5355 CANOE CREEK RD
SAINT CLOUD, FL 34772

FEI Number: 59-2502400

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEIER, GREGORY W. ESQ.
1000 LEGION PLACE
SUITE 1700
ORLANDO, FL 32801 US

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.

SIGNATURE: GREGORY W. MEIER

02/10/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name PARTIN, JOHN H
Address 5791 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title SECRETARY, TREASURER,
DIRECTOR
Name BOOTH, RICHARD S
Address 6001 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR, VP
Name SOILEAU, JULIA P
Address 6251 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR, VP
Name KEMPFER, HENRY H
Address ONE BUMPY ROAD
City-State-Zip: MELBOURNE FL 32904

Title DIRECTOR
Name FLUKE, ASHLEY BOOTH
Address 6101 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR
Name BOOTH, MARTHA PARTIN
Address 6105 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR
Name BOOTH, RANDALL P
Address 6107 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR
Name BOOTH, THOMAS W
Address 6105 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN H. PARTIN

PRESIDENT

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PARTIN, AMY
Address 1907 A1A #105
City-State-Zip: INDIAN HARBOR BEACH FL 32937

Title DIRECTOR
Name KEMPFER, W. MICHAEL
Address 8057 OCEAN PRAIRIE ROAD
City-State-Zip: MELBOURNE FL 32904

Title DIRECTOR
Name PACE, DEBRA PARTIN
Address 5365 CANOE CREEK ROAD
City-State-Zip: ST. CLOUD FL 34772

Title DIRECTOR
Name KEMPFER, GEORGE H
Address 6499 SAPLING LANE
City-State-Zip: MELBOURNE FL 32904

Title DIRECTOR
Name CAMPBELL, BLUE
Address 6224 KEMPFER ROAD
City-State-Zip: ST. CLOUD FL 34773

Title DIRECTOR
Name WHALEY, KATHERINE P
Address 5400 N. CANOE CREEK ROAD
City-State-Zip: KENANSVILLE FL 34739