

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90062 033 ***150.00

DOCUMENT # 142550

1. Entity Name
OFF THE RANCH, INC.



Principal Place of Business
**CIRTUS BANK BLDG
12200 WEST COLONIAL DRIVE STE 2001
WINTER GARDEN, FL 34787**

Mailing Address
**CIRTUS BANK BLDG
12200 WEST COLONIAL DRIVE STE 2001
WINTER GARDEN, FL 34787**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
PO Box 699
Suite, Apt. #, etc.

03112004 Chg-P CR2E034 (10/03)

City & State
Apopka, FL

Zip
32704-0699

Country
USA

4. FEI Number
59-3519025

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**MCCALL, RANDALL E
CITRUS BANK BLDG
12200 WEST COLONIAL DRIVE STE 2001
WINTER GARDEN, FL 34787**

7. Name and Address of New Registered Agent

Name
105 E Robinson Street
Suite 540
City
Orlando FL Zip Code
32801

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MCCALL, RONALD W 12200 WEST COLONIAL DRIVE STE 2001 WINTER GARDEN, FL 34787	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MCCALL, HOLLY J 12200 WEST COLONIAL DRIVE STE 2001 WINTER GARDEN, FL 34787	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST MCCALL, RANDALL E 12200 WEST COLONIAL DRIVE STE 2001 WINTER GARDEN, FL 34787	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO Box 699 Apopka, FL 32704-0699	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO Box 699 Apopka, FL 32704-0699	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO Box 699 Apopka, FL 32704-0699	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: Ronald E. McCall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/04 407-880-9029
Date Daytime Phone #