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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY - S1 - 7(2)

Lam an officer or director of appears in Block 12 or Block



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 280805

(3)

RIVER RI	DGE RANCHES INC				
Principal Place of Business 1033 EAST PINE ST. P.O. BOX 430		Mailing Address 1033 EAST PINE ST. P.O. BOX 430		I (00)/G 1(80) (0)/I) 0)/I) 10/II 10/II 10/II 10/II	RIBLI OVOJA OPOJI OVOJA BIZAR DJEDI ADDI
AVON PARK FL	33825-7430	AVON PARK FL 33826-0430		3. Date Incorporated or Qualified 05/18/1964	3a. Date of Last Report 04/30/1996
2. Principal Pl	lace of Business	2a. Mailing Address 26		4. FEI Number 59-1101368	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
71p 24	Country 25	Zip 3	Country 0		Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Re	gistered Agent
US 2	a Jr, Robert R. 27 South N Park Fl 33825		81 Name 82 Street Addi 83 84 City	ress (P.O. Box Number is Not Acceptal	es 7in Code
11. Pursuant office or tagent. La	to the Provisions of Sections 607.050: ogistored agent, or both, in the State on transicowith, and active the oblige	N tolerate		poration submits this statement for the tion's board of directors. I hereby acce	FLIT
0.000	Signature typical or printed name of registered at a	umo title il applicable. (NOTE: I	Registered Agent signature requi		DATE
12.	OFFICERS AND		13. '	ADDITIONS/CHANGES TO OFFI	
1011	PD	Ŭ DELETE	1.1 TITLE		Change Addition
NAME	KING JR,ROBERT R		1,2 NAME		
STREET ADDRESS	1989 LAKE LOTELA DR		1.3 STREET ADDRESS		
€/TY+ST-ZiP	AVON PARK FL		1.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	2.1 TITLE		Change Addition
NAME	CRUSE, GENE S.		2.2 NAME		
STREET ADDRESS	901 W. MAIN ST.		2.3 STREET ADDRESS		
CITY-ST-7IP	AVON PARK FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE		Change Addition
NAMÉ	DELANEY, LEON ASST.		3.2 NAME		
STREET ADDRESS	85 GRANDVIEW BLVD.		3.3 STREET ADDRESS		
CITY-ST ZIP	LAKE PLACID FL	DECTE	3.4. CITY-ST-ZIP		Change Addition
BILLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		İ
C(1y-S1-ZIF		I DELETE	4.4 CITY-ST-ZIP		Change Addition
THE		☐ DELETÉ	5.1 TITLE		C) change C Moutton
MAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-SI-Zif*		I nevere	5.4 CITY-ST-ZIP		Change Addition
THILE		☐ DELETE	61 TITLE		ELI CHANGE ELI AUGIRON
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY - \$1 - 712			64 CITY-ST-ZIP		

14. I do 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 finual 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 op an attachment with an address.