2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# 321219

Entity Name: (M) CROSS RANCH, INC.

Current Principal Place of Business:

P O BOX 516
409 S.W. 15TH ST.
OKEECHOBEE, FL 349737516

New Principal Place of Business:

409 S.W. 15TH ST>
OKEECHOBEE, FL 34974

Current Mailing Address:

P O BOX 516
409 S.W. 15TH ST.
OKEECHOBEE, FL 349737516

New Mailing Address:

409 S. W. 15TH ST.
OKEECHOBEE, FL 34974

FEI Number: 59-1212262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, ROGER L
409 SW 15TH ST
OKEECHOBEE, FL 34973 US

Name and Address of New Registered Agent:

JONES, ROGER L
409 SW 15TH ST
OKEECHOBEE, FL 34974 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: 04/27/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JONES,MILDRED E
Address: 409 S.W. 15TH ST.
City-St-Zip: OKEECHOBEE, FL

Title: ST ( ) Delete
Name: JONES,ROGER L
Address: 409 S.W. 15TH ST.
City-St-Zip: OKEECHOBEE, FL

Title: D ( ) Delete
Name: WIERSMA, TONI I.
Address: 408 S.W. 15TH STREET
City-St-Zip: OKEECHOBEE, FL

Title: D ( ) Delete
Name: JONES, DONALD R.
Address: 7740 S.W. 13TH STREET
City-St-Zip: OKEECHOBEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: JONES,MILDRED E
Address: 409 S.W. 15TH ST.
City-St-Zip: OKEECHOBEE, FL 34974

Title: STD (X) Change ( ) Addition
Name: JONES,ROGER L
Address: 409 S.W. 15TH ST.
City-St-Zip: OKEECHOBEE, FL 34974

Title: D (X) Change ( ) Addition
Name: WIERSMA, TONI I.
Address: 408 S.W. 15TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

Title: D (X) Change ( ) Addition
Name: JONES, DONALD R.
Address: 7740 S.W. 13TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROGER L. JONES STD 04/27/2009
Electronic Signature of Signing Officer or Director — Date