

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 380968

FILED  
Apr 12, 2005  
Secretary of State

Entity Name: QUAD T. RANCH CORPORATION

**Current Principal Place of Business:**

2812 NORRIS AVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 940931  
MAITLAND, FL 32794

**New Mailing Address:**

FEI Number: 59-1323920

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAAST, N J MISS  
2812 NORRIS AV  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HAAST, W.E. III  
Address: 873 FIRST STREET  
City-St-Zip: CEDAR KEY, FL 32625

Title: VPST ( ) Delete  
Name: HAAST, N J MISS  
Address: 2812 NORRIS AV  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MISS N.J. HAAST

VPST

04/12/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date