

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 400773

FILED
Apr 26, 2006
Secretary of State

Entity Name: GRASS VALLEY RANCH, INC.

Current Principal Place of Business:

5320 COWPEN DR
ZOLFO SPRINGS, FL 33890 US

New Principal Place of Business:

Current Mailing Address:

5320 COW PEN DRIVE
ZOLFO SPRINGS, FL 33890 US

New Mailing Address:

FEI Number: 59-1447103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUNTING, TRIPP & INGLEY
230-236 E. TILMAN AVENUE
LAKE WALES, FL 33853 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: D () Delete
Name: PLATT, JOHN P,
Address: 5320 COWPEN DR
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: PD () Delete
Name: PLATT, JOHN B
Address: P.O. BOX 127
City-St-Zip: WAUCHULA, FL 33873

Title: STD () Delete
Name: PLATT, ARLEEN,
Address: 5320 COWPEN DR
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: D () Delete
Name: SATUR, KAREN,
Address: 867 N.E. KUBIN AVE.
City-St-Zip: JENSEN BEACH, FL 34957

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D () Change (X) Addition
Name: PLATT, JANICE M.,
Address: P O BOX 127
City-St-Zip: WAUCHULA, FL 33873

I hereby certify that the information supplied with this filing does not qualify for the 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: JANICE M. PLATT

D

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date