2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # 434454

1. Entity Name
WARD RANCH, INC.

Principal Place of Business	Mailing Address
1855 TAYLOR CREEK RD. PO BOX 65 CHRISTMAS, FL 32709	1855 TAYLOR CREEK RD. CHRISTMAS, FL 32709 US

DO NOT WRITE IN THIS SPACE

03042008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1497702
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WARD, DAVID
1703 TAYLOR CREEK RD.
CHRISTMAS, FL 32709

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	WARD, DAVID R.
STREET ADDRESS	1703 TAYLOR CREEK RD
CITY-ST-ZIP	CHRISTMAS, FL 32709
TITLE	VD
NAME	WALTER, JANIS M
STREET ADDRESS	1855 TAYLOR CREEK RD
CITY-ST-ZIP	CHRISTMAS, FL 32709
TITLE	TD
NAME	DRINKWATER, EMILY
STREET ADDRESS	1611 TAYLOR CREEK RD.
CITY-ST-ZIP	CHRISTMAS, FL 32709
TITLE	D
NAME	WALTER, MATTHEW
STREET ADDRESS	1909 EASTERN AVE.
CITY-ST-ZIP	SAINT CLOUD, FL 34769
TITLE	D
NAME	SIMMONS, REBECCA
STREET ADDRESS	829 CHICKASAW TRAIL
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	D
NAME	AVERHOFF, MICHELLE
STREET ADDRESS	3302 F ROAD
CITY-ST-ZIP	GARDEN CITY, KS 67846

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03/26/08-80018-025 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Janis M Walter Sec/Tres 3-05-2008 407-568-4087
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #