

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 444276

FILED
Apr 20, 2009
Secretary of State

Entity Name: RAY C. HULL RANCH, INC.

Current Principal Place of Business:

N E INTERSECTION DOOLEY STATE RD, 833
PO BOX 427
LABELLE, FL 33935

New Principal Place of Business:

123 HENDRY ST.
N E INTERSECTION DOOLEY STATE RD, 833
LABELLE, FL 33935

Current Mailing Address:

N E INTERSECTION DOOLEY STATE RD, 833
PO BOX 427
LABELLE, FL 33935

New Mailing Address:

FEI Number: 59-1510632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULL, ROSA L
123 HENDRY ST.
LA BELLE, FL 33975 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: PD () Delete
Name: HULL, ROSA L
Address: NE INT DOOLEY RD, SR 833
City-St-Zip: LABELLE, FL

Title: TD () Delete
Name: WILLIS, GLENDA
Address: P.O. BOX 53
City-St-Zip: FELDA, FL 33930

Title: VD () Delete
Name: HULL, RAY C, JR
Address: NE INT DOOLEY RD, SR 833
City-St-Zip: LABELLE, FL 00000,

Title: SD () Delete
Name: BRIGHTMAN, LAURA M
Address: 7349 GERRELYN COVE
City-St-Zip: OLIVE BRANCH, MS 38654

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:

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: ROSA LEE HULL

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date