Applicable

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90034 017 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 460014

1. Corporatio	RANCH BY THE SEA, INC				
Principal Place of Business Mailing Address				•	
298 72ND ST. OCEAN 895 SUNDIAL MARATHON FL 33050 LIVERMORE CA 94550					DO NOT WRITE IN THIS SPACE
1					Date Incorporated or Qualifed 02/13/1975
Principal Place of Business 1		2a. Mailing Address 26			4. FEI Number 5 5 11 5 14 0 Applied For Not Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & State City & State 23 28		City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country 25	Zip 3	Counti	У	8, This corporation owes the current year Intangible Personal Property Tax.
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
MOHN, JEAN D 298 72ND ST. OCEAN MARATHON FL 33050			8	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83	
	,		8		FL 85 Zip Code
office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change was autl	horized b	y the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag		egistered Ag	ent signature re	equired when reinstating) DATE
		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addit
NAME	MOHN, JEAN D		1.2 NAME		
STREET ADDRESS	ALE (ADDILLO)			ET ADDRESS	
CITY+ST-ZIP			14 CITY-		☐ Change ☐ Addit
TILE			2.1 TITLE		
		2.2 NAME			
VIII ASSESS			ET ADDRESS	i man	
CITY-ST-ZIP			2.4 CITY	·31-ZIP	

☐ Addition ☐ DELETE 31 TITLE ☐ Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP []] Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ___ Addition TITLE ☐ DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

☐ Addition

Addition