

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

FILED  
Mar 09 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **472145** (2)  
1. Corporation Name  
**LITTLE DUDE RANCH, INC.**

Principal Place of Business <b>722 S LAKE SIDE DR C/O MR RAY F FLOW LAKE WORTH FL 33460</b>	Mailing Address <b>722 S LAKE SIDE DR C/O MR RAY F FLOW LAKE WORTH FL 33460</b>
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>RAY FLOW</b> Suite, Apt. #, etc. 22 <b>1350 N. OCEAN BLVD</b> City & State 23 <b>PALM BEACH, FL</b> Zip Country 24 <b>33480</b> 25 <b>Palm Bch.</b>		2a. Mailing Address 26 <b>RAY FLOW</b> Suite, Apt. #, etc. 27 <b>1350 N. OCEAN BLVD</b> City & State 28 <b>PALM BEACH FL</b> Zip Country 29 <b>33480</b> 30 <b>Palm Bch.</b>		3. Date Incorporated or Qualified <b>03/19/1975</b>	4. FEI Number <b>59-1596244</b> Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--	---	--	--	---	--	---	---

9. Name and Address of Current Registered Agent <b>BLACKWOOD, THOMAS B. 3048 S. CONGRESS AVENUE LAKE WORTH FL 33461</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code	
--	--	---	--

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLOW, RAY F	1.2 NAME	
STREET ADDRESS	722 S LAKESIDE DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH, FL 3	1.4 CITY-ST-ZIP	
TITLE	TV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLOW, SHARON G	2.2 NAME	
STREET ADDRESS	722 S LAKESIDE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH, FL 3	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLOW, KELLY	3.2 NAME	
STREET ADDRESS	722 SO LAKESIDE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLOW, MELANY	4.2 NAME	
STREET ADDRESS	722 SO LAKESIDE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 empowered 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.

SIGNATURE:

3-7-98

CR2E034 (10/97)