## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: \_

SHONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

## Jan 25, 2006 08:00 AM **DOCUMENT #632926** Secretary of State 1. Entity Name LEVY RANCHETTES, INC. Principal Place of Business Mailing Address 4127 NW 27TH LN. PO BOX 357845 GAINESVILLE, FL 32635 SUITE A GAINESVILLE, FL 32606 01112006 No Chp-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1934648 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LEE, DENNIS G. DO NOT WRITE 4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS SPD BILE NAME LEE, DENNIS STREET ADDRESS 4127 NW 27TH LN., SUITE A CITY -S\$-ZIP GAINESVILLE, FL 32606 ASV TITLE LEE, CARIDAD NARAF 4127 NW 27TH LN., SUITE A STREET ADDRESS COY-SG-782 GAINESVILLE, FL 32606 mile HALSE DAVIES, LISA STREET ADDRESS 4127 NW 27TH LN., SUITE A DO NOT WRITE COY-ST-ZIP GAINESVILLE, FL 32006 BBF IN THIS SPACE NAME STREET AUGRESS CITY-ST-ZIP SISLE MAME STREET AUDRESS OBY-ST-709 TITLE MMA STREET ADDRESS CITY-ST-ZIP 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 supplainental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am at 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 charged, or on an attachment with an adignose, with all other like empowered.

Dennis C. Lee

1-17-06

FILED