

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 673653

FILED
Feb 26, 2009
Secretary of State

Entity Name: RAFTER C. RANCH, INC.

Current Principal Place of Business:

STATE ROAD 684
1143 MOFFITT RD.
ZOLFO SPRINGS, FL 33890 US

New Principal Place of Business:

Current Mailing Address:

STATE ROAD 684
1143 MOFFITT RD.
ZOLFO SPRINGS, FL 33890 US

New Mailing Address:

FEI Number: 59-2044356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLTON, ELLA MAE
STATE RD 684
1143 MOFFITT RD.
ZOLFO SPRINGS, FL 33890 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: S () Delete
Name: BROWN SANDRA C,
Address: 1143 MOFFITT RD
City-St-Zip: ZOLFO SPRINGS, FL

Title: T () Delete
Name: CARLTON, RONNIE S,
Address: 4372 JOHN CARLTON RD
City-St-Zip: ZOLFO SPRINGS, FL 00000,

Title: P () Delete
Name: CARLTON, ELLA MAE,
Address: 1143 MOFFITT RD
City-St-Zip: ZOLFO SPRINGS, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BROWN SANDRA C,
Address: 1143 MOFFITT RD
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: T (X) Change () Addition
Name: CARLTON, RONNIE S,
Address: 4372 JOHN CARLTON RD
City-St-Zip: ZOLFO SPRINGS,, FL 33890 US

Title: P (X) Change () Addition
Name: CARLTON, ELLA MAE,
Address: 1143 MOFFITT RD
City-St-Zip: ZOLFO SPRINGS,, FL 33890 US

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: SANDRA C BROWN

S

02/26/2009

Electronic Signature of Signing Officer or Director

_____ Date