

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **714161**

(7)

1. Corporation Name

**HACIENDA GIRL'S RANCH, INC.**

Principal Place of Business

Mailing Address

326 CROTON RD  
PO BOX 361097  
MELBOURNE FL 32936-1097

326 CROTON RD  
PO BOX 361097  
MELBOURNE FL 32936-1097



3. Date Incorporated or Qualified  
**02/26/1968**

3a. Date of Last Report  
**02/14/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number  
**59-6211487**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRIGSBY, MARILYN W.  
26 DANUBE RIVER DRIVE  
COCOA BEACH FL 32931

81 Name

Fishpaw, Jarrett K

82 Street Address (P.O. Box Number is Not Acceptable)

6831 Norman Drive

83

84 City

Melbourne

FL

85 Zip Code  
32904

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE **Jarrett K. Fishpaw, Exec. Executive Director**

*Jarrett Fishpaw* 01/17/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE  
NAME **BURGER, ROBERT T.**  
STREET ADDRESS **345 BAY POINT DR.**  
CITY-ST-ZIP **MELBOURNE FL**

1.1 TITLE **V** ☐ Change ☒ Addition  
1.2 NAME **Holeman, Vaughn**  
1.3 STREET ADDRESS **2101 S. Waverly Pl., Ste #100**  
1.4 CITY-ST-ZIP **Melbourne, FL 32901**

TITLE **T** ☐ DELETE  
NAME **MORLEY, RICHARD A**  
STREET ADDRESS **1045 SAMAR RD.**  
CITY-ST-ZIP **COCOA BEACH FL**

2.1 TITLE **T** ☐ Change ☒ Addition  
2.2 NAME **Kinberg, Edward J**  
2.3 STREET ADDRESS **770 Verbenia**  
2.4 CITY-ST-ZIP **Satellite Beach, FL 32937**

TITLE **D** ☐ DELETE  
NAME **SMITH, JIMMIE L**  
STREET ADDRESS **500 W. FEE AVE.**  
CITY-ST-ZIP **MELBOURNE FL**

3.1 TITLE **D** ☐ Change ☒ Addition  
3.2 NAME **Fishpaw, Jarrett K**  
3.3 STREET ADDRESS **6831 Norman Drive**  
3.4 CITY-ST-ZIP **Melbourne, FL 32904**

TITLE **V** ☒ DELETE  
NAME **MURPHY, MARY G**  
STREET ADDRESS **1441 DONNA MARIE DR.**  
CITY-ST-ZIP **MELBOURNE FL**

4.1 TITLE **D** ☒ Change ☐ Addition  
4.2 NAME **Morley, Richard A**  
4.3 STREET ADDRESS **1530 Bayshore Drive**  
4.4 CITY-ST-ZIP **Cocoa Beach, FL 32931**

TITLE **D** ☒ DELETE  
NAME **GRIGSBY, MARILYN**  
STREET ADDRESS **26 DANUBE RIVER DRIVE**  
CITY-ST-ZIP **COCOA BEACH FL**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE **P** ☐ DELETE  
NAME **DANIEL, RUTH**  
STREET ADDRESS **12851 MICANOPY LANE**  
CITY-ST-ZIP **JACKSONVILLE FL**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Jarrett K. Fishpaw,**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/17/96

(407) 254-1233

CR2E037 (12/95)