FILED **FILE NOW: FILING FEE IS \$61.25** Jun 20 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # 733955 (9) SCURETAKT OF STATE TALLAHASSEE FLORIDA THE NAKED LADY RANCH, INC. Principal Place of Business Mailing Address 6100 S.W. MOORES STREET 6100 S.W. MOORES STREET P. O. BOX 332 P. O. BOX 332 PALM CITY FL 34991 PALM CITY FL 34991-0332 3. Date Incorporated or Qualified 3a. Date of Last Report 09/30/1975 04/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1647303 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 28 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name SALES, RONALD **B2** Street Address (P.O. Box Number is Not Acceptable) 1551 FORUM PL STE 300F 83 W PALM BCH FL 33402 City 84 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. X DELETE D CARNEY, JOHN Change TITLE . 1.1 TITLE NAME ARTHUR, ANDREW 12 NAME 5405 SW 61-DRNE STREET ADDRESS 4905 SW 61ST DR. 1.3 STREET ADDRESS PALM CITY PL 34990 PALM CITY FL 34990 City-St-7iP 1.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE DΝ 2.1 TITLE CARNEY, STEPHANIE P. CARNEY, STEPHANIE P. 2.2 NAME NAME 5405 SW 61 DRIVE PARM CITY, FL 34990 5405 SW 61ST DR. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP PALM CITY FL 34990 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE ROOT, KETTH NAME ROOT, KEITH 3.2 NAME 6344 EWSQ TERR 6344 SW 52ND TERR. STREET ADDRESS 3.3 STREET ADDRESS PALM CITY FL 34990 PALM CITY FL 34990 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE 4.1 TITLE DANNECKER, WILLIAM C. WARDEN, RICHARD V. NAME **4.2 NAME** 6054 GW 52 TERRACE STREET ADDRESS PO BOX 555 N/A 4.3 STREET ADDRESS PALM CITY, PL 34990 CITY-ST-ZIP PALM CITY FL 34991 4.4 CITY - ST - ZIP

PALM CITY FL 64 CITY-ST-ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

Change

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OLIVER, ROBERT

5812 SW 61 DRIVE

PALM CITY PL 34990

Addition

DELETE

DELETE

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ARTHUR, DEANNA L

4905 SW 61ST DRIVE

WHITE, SHELLEY B

5705 SW 61ST DR

PALM CITY FL