

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

DOCUMENT # A94000001126

1. Entity Name
RUTLAND RANCH, LTD.



SECRETARY OF STATE
 DIVISION OF CORPORATIONS

07 JUL 26 AM 9:56

Principal Place of Business
 300 1ST AVE. S., STE. 200
 ST. PETERSBURG, FL 33701

Mailing Address
 300 1ST AVENUE SOUTH
 SUITE 200
 ST PETERSBURG, FL 33701



2. Principal Place of Business - No P.O. Box #
13535 Feathersound Dr

3. Mailing Address
13535 Feathersound Dr

Suite, Apt. #, etc.
Suite 220

Suite, Apt. #, etc.
Suite 220

07122007 Chg-LP CR2E003 (12/06)

City & State
Clearwater, FL

City & State
Clearwater, FL

4. FEI Number
 59-7030675

Applied For
 Not Applicable

Zip
33762

Country

Zip
33762

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZINO, GARY
 C/O REGIONS BANK
 1511 N. WESTSHORE BLVD
 TAMPA, FL 33607

Name **Zino Gary**
 Street Address (P.O. Box Number is Not Acceptable)
C/O Regions Bank
13535 Feathersound Dr, Ste 220
 City **Clearwater** FL Zip Code **33762**

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

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

DATE

FILE NOW!!! FEE IS \$900.00
On or after September 14, 2007, Fee will be \$1000.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
 NAME REGIONS BANK, TRUSTEE
 STREET ADDRESS 300 1ST AVENUE SOUTH, SUITE 200
 CITY-ST-ZIP ST PETERSBURG, FL 33701

DOCUMENT #
 NAME REGIONS BANK, TRUSTEE
 STREET ADDRESS 300 1ST AVENUE SOUTH, SUITE 200
 CITY-ST-ZIP ST PETERSBURG, FL 33701

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 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS **106 St. Francis Street**
 CITY-ST-ZIP **Mobile, AL 36602**

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 CITY-ST-ZIP **Mobile, AL 36602**

STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS **300106816893**
 CITY-ST-ZIP **07/27/07--01027--009 **900.00**

STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

BLT

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

7-19-07 727-592-6915

STAPLE CHECK HERE