

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006269

FILED
Apr 19, 2006
Secretary of State

Entity Name: SANGRE DE CRISTO RANCHES INC.

Current Principal Place of Business:

60 FIFTH AVENUE
NEW YORK, NY 10011

New Principal Place of Business:

Current Mailing Address:

60 FIFTH AVENUE
NEW YORK, NY 10011

New Mailing Address:

FEI Number: 13-4050102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: SEAN, HEGARTY P
Address: 60 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10011

Title: V () Delete
Name: FORBES, CHRISTOPHER
Address: 60 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10011

Title: V () Delete
Name: FORBES, ROBERT
Address: 60 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10011

Title: CFO () Delete
Name: PHILIP, REVILLE
Address: 60 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10011

Title: AS () Delete
Name: VIGIL, FRANK
Address: STAR ROUTE, PO BOX 303
City-St-Zip: FORT GARLAND, CO 81133

Title: VP () Delete
Name: RYLAND, TY
Address: STAR ROUTE, PO BOX 303
City-St-Zip: FORT GARLAND, CO 81133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK VIGIL

AS

04/19/2006

Electronic Signature of Signing Officer or Director

Date