

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01941

FILED
Apr 28, 2009
Secretary of State

Entity Name: BAR SEVEN RANCH, INC.

Current Principal Place of Business:

5300 N.CANOE CREEK RD.
KENANSVILLE, FL 347399619

New Principal Place of Business:

Current Mailing Address:

5300 N.CANOE CREEK RD.
KENANSVILLE, FL 347399619

New Mailing Address:

FEI Number: 59-2046012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN CPA GROUP, PA
4175 US1
SUITE 102
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

LYNN CPA GROUP, PA
9145 NARCOOSSEE ROAD
SUITE 203
ORLANDO, FL 32827 US

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: LYNN CPA GROUP, PA

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLARK, JOHN S
Address: 5300 CANOE CREEK RD.
City-St-Zip: KISSIMMEE, FL 34739

Title: STD () Delete
Name: CLARK, JOHN SLADE
Address: 5300 CANOE CREEK RD.
City-St-Zip: KISSIMMEE, FL 34739

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
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 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: JOHN CLARK

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date