

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

ANNUAL REPORT
1995



STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

9:07:00 PM 11:21

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # F93000003775 (4)

1. Corporation Name

STERLING RANCH LAND COMPANY

Principal Place of Business
12700 HILLCREST ROAD, SUITE 190
DALLAS TX 75230

Mailing Address
12700 HILLCREST ROAD, SUITE 190
DALLAS TX 75230

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/18/1993	3a. Date of Last Report 01/24/1994
4. FEI Number 75-2492306	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	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	25 Country
29	30

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Signature of person authorized to appoint agent and must be approved) (Signature of person aged 21 or older must be approved)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	PSTD WOLBE, ELLIS	1.1 TITLE	☐ Change ☐ Addition
2. STREET ADDRESS	12700 HILLCREST ROAD, SUITE 190	1.2 NAME	
3. CITY - ST - ZIP	DALLAS TX 75230	1.3 STREET ADDRESS	
4. TITLE		1.4 CITY - ST - ZIP	
5. NAME		2.1 TITLE	☐ Change ☐ Addition
6. STREET ADDRESS		2.2 NAME	
7. CITY - ST - ZIP		2.3 STREET ADDRESS	
8. TITLE		2.4 CITY - ST - ZIP	
9. NAME		3.1 TITLE	☐ Change ☐ Addition
10. STREET ADDRESS		3.2 NAME	
11. CITY - ST - ZIP		3.3 STREET ADDRESS	
12. TITLE		3.4 CITY - ST - ZIP	
13. NAME		4.1 TITLE	☐ Change ☐ Addition
14. STREET ADDRESS		4.2 NAME	
15. CITY - ST - ZIP		4.3 STREET ADDRESS	
16. TITLE		4.4 CITY - ST - ZIP	
17. NAME		5.1 TITLE	☐ Change ☐ Addition
18. STREET ADDRESS		5.2 NAME	
19. CITY - ST - ZIP		5.3 STREET ADDRESS	
20. TITLE		5.4 CITY - ST - ZIP	
21. NAME		6.1 TITLE	☐ Change ☐ Addition
22. STREET ADDRESS		6.2 NAME	
23. CITY - ST - ZIP		6.3 STREET ADDRESS	
24. TITLE		6.4 CITY - ST - ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(4)(b), 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. If 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 on Block 12 or Block 13 if changed, or on an attached sheet with my address.

SIGNATURE: *Ellis Wolbe*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ELLIS WOLBE PRES.
x 2/2/95 * (913) 539-0777