

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F96000000639 (2)**  
1. Corporation Name

**LIDDELL RANCHES, INC.**

Principal Place of Business

**6535 N. PALM, SUITE 104  
FRESNO CA 93704**

Mailing Address

**6535 N. PALM, SUITE 104  
FRESNO CA 93704**

**FILED**  
**Sep 11 1998 8:00am**  
**Secretary of State**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**02/08/1996**

4. FEI Number

**94-2497684**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

**21 SADDLE CREEK APTS.**

Suite, Apt. #, etc.

**22 5414 26TH ST. W.**

City & State

**23 BRADENTON, FL**

Zip

**24 34207**

Country

2a. Mailing Address

**26 16105 GOLF COURSE RD.**

Suite, Apt. #, etc.

**27**

City & State

**28 PARRISH, FL**

Zip

**29 34219**

Country

**30**

9. Name and Address of Current Registered Agent

**RADKE, RICHARD W ESQUIRE  
BARNETT, BOLT, KIRKWOOD & LONG, P.A.  
601 BAYSHORE BOULEVARD, SUITE 700  
TAMPA FL 33606**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PC**  
NAME **LIDDELL, ANDREW L**  
STREET ADDRESS **1510 STEEL BRIDGE ROAD**  
CITY-ST-ZIP **KALISPELL MT 59901**

☐ DELETE

TITLE **VCV**  
NAME **LIDDELL, NORMAN J**  
STREET ADDRESS **16105 GOLF COURSE RD.**  
CITY-ST-ZIP **PARRISH FL 34219**

☐ DELETE

TITLE **SD**  
NAME **WOLFE, BRENDA S**  
STREET ADDRESS **22895 FLORES AVENUE**  
CITY-ST-ZIP **RED BLUFFS CA 96080**

☐ DELETE

TITLE **CFOT**  
NAME **WRIGHT, PATRICIA**  
STREET ADDRESS **5811 TWO 16TH PLACE N.E.**  
CITY-ST-ZIP **REDMOND WA 98052**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

**2305 W. BRIDLE PATH  
PRESCOTT, AZ 86301**

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**500002636985**

**-09/11/98--01036--047**

**\*\*\*150.00**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

**8/20/98 94 776 2652**

CR2E034 (5/98)

(2)

**LIDDELL RANCHES, INC.**  
**16105 Golf Course Road**  
**Parrish, Florida 34219**  
**Telephone 941 776-2652**

August 20, 1998

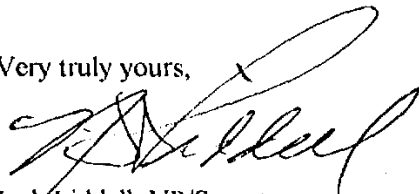
Division of Corporations  
Annual Reports Section  
P.O. Box 6327  
Tallahassee, Fl 32314

We have enclosed our completed annual report along with our corporate check in the amount of \$150. We respectfully request abatement of any late filing fees due to reasonable cause.

We have changed our corporate address and the first notice was not received.

Thank you for your consideration.

Very truly yours,



Jack Liddell, VP/Secretary