2005 FOR PROFIT. CORPORATION ANNUAL REPORT (AR)

Jan 24, 2005 08:00 AM DOCUMENT # G09528 **Secretary of State** 1. Entity Name DAN BENNETT RANCH, INC. Principal Place of Business Mailing Address 2151 N HARTMAN RD AVON PARK FL 33825 2151 N HARTMAN RD AVON PARK FL 33825 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For 4. FEI Number City & State City & State NO-T APPLICABLE Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENNETT, DAN Street Address (P.O. Box Number is Not Acceptable) 2151 N.HARTMAN RD. AVON PARK FL 33825 Zip Code City 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: Special or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when teinstaling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete UTLE Change Addition BENNETT, JAMES A. NAME NAME STREET ADDRESS 2151 N HARTMAN RD STREET ADDRESS CHY-ST 2P CITY-ST-ZIP AVON PARK FL Change Addition THEF ☐ Delete TITE & BENNETT, DAN NAME NAME STREET ADDRESS 2151 N HARTMAN RD STREET ADDRESS AVON PARK FL CHY-ST-ZIP CITY-ST 7/P Change Addition ИЦΕ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP [] Change ☐ Addition ☐ Delete THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP Change ☐ Addition mu Delete NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZE CITY-ST-71P

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

FILED