

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 8:00 am
Secretary of State

01-14-2008 90109 005 ***150.00

DOCUMENT # G19063

1. Entity Name
RANCH MANAGEMENT CONSULTANTS, INC.



Principal Place of Business
695 S.W. U.S. HIGHWAY 1
P. O. BOX 2187
VERO BCH., FL 32961-2187 US

Mailing Address
695 S.W. U.S. HIGHWAY 1
P O BOX 2187
VERO BCH, FL 32961-2187

2. Principal Place of Business - No P.O. Box #

3. Mailing Address
P O Box 1208

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072008

Chg-P

CR2E034 (12/06)

City & State

City & State
Vero Beach, FL 32961

4. FEI Number
59-2316133

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALDWELL, WILLIAM W.
756 BEACHLAND BLVD
VERO BEACH, FL 32963

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when rechartering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME SEXTON, RALPH W
STREET ADDRESS 8005 37TH STREET
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME SEXTON, SEAN E
STREET ADDRESS 7880 37TH STREET
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME SEXTON, JANET CHRISTINE
STREET ADDRESS 8005 37TH STREET
CITY-ST-ZIP VERO BEACH, FL 32966

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Asst Sec/Treas
STREET ADDRESS Egan, J.B., III
CITY-ST-ZIP 4631 9th Place
VERO BEACH, FL 32966

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

J.B. Egan III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-08
Date

772-562-2202
Daytime Phone