


06/19/2006 22:06 9543164774

WINDELL MOOR

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90079 037 \*\*\*\*50.00

**2007 LIMITED LIABILITY COMPANY  
 ANNUAL REPORT**

<b>DOCUMENT # L06000084066</b>			
1. Entity Name GOLDEN RANCHES ENTERPRISES, LLC			
Principal Place of Business 4928 SW 198TH TERRACE SOUTHWEST RANCHES, FL 33332		Mailing Address 4928 SW 198TH TERRACE SOUTHWEST RANCHES, FL 33332	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GONZALEZ, ROBERT F 17610 SW 48TH STREET SOUTHWEST RANCHES, FL 33331-1110		Name <u>Robert F Gonzalez</u> Street Address (P.O. Box Number is Not Acceptable) <u>4928 SW 198th Terrace</u> City <u>SW Ranches</u> FL Zip Code <u>33332</u>	
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 _____ (NOTE: Registered Agent signature required when reappointing)			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GONZALEZ, ROBERT F 17610 SW 48TH STREET SOUTHWEST RANCHES, FL 333311110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.			
SIGNATURE: <u>[Signature]</u>		Date <u>4/25/07</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	

60046314



01222007 Chg-LLC CR2E083 (12/06)

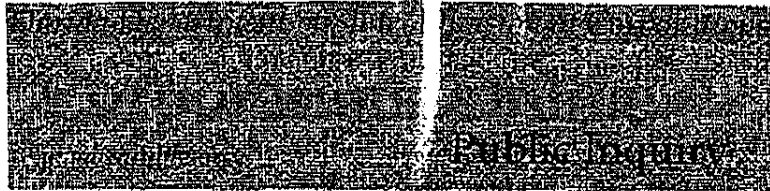
4. FEI Number 76-0843224 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

ATTACHMENT

60046314

ELL MOORE CPA PA



## Florida Limited Liability

### GOLDEN RANCHES ENTERPRISES, LLC

**PRINCIPAL ADDRESS**  
4928 SW 198TH TERRACE  
SOUTHWEST RANCHES FL 33332  
Changed 09/18/2006

**MAILING ADDRESS**  
4928 SW 198TH TERRACE  
SOUTHWEST RANCHES FL 33332  
Changed 09/18/2006

**Document Number**  
L06000084066

**State**  
FL

**FEI Number**  
NONE

**Status**  
ACTIVE

**Date Filed**  
08/24/2006

**Effective Date**  
NONE

**Total Contribution**  
0.00

## Registered Agent

Name & Address
GONZALEZ, ROBERT F 17610 SW 48TH STREET SOUTHWEST RANCHES FL 33331-1110

## Manager/Member Detail

Name & Address	Title
GONZALEZ, ROBERT F 17610 SW 48TH STREET SOUTHWEST RANCHES FL 33331-1110	MGR

## Annual Reports