## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## N93000000444 (0) **DOCUMENT #**1. Corporation Name

## T & M RANCH COMMUNITY, INC.

Principal Place of Business  9601 SW FOX BROWN ROAD INDIANTOWN FL 34956			Mailing Address 9601 SW FOX BROWN ROAD INDIANTOWN FL 34958-9714				- 1 1831/191 BIO 10100 IIIIN ODIN ODIN	OOTH OOTH OOTH OOTH	(1046 01011 0101 <b>(04</b> 1	
							3. Date incorporated or Qualified 02/02/1993	3a. Date of La. 02/14	st Report /1996	
2. Principal Place of Business			2a. Malting Address				4. FEI Number		Applied For	
21			26				65-0378070		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional	
City & State			City & State			<del> </del>	& Floring Commission Financia		e Required	
23			28				Election Campaign Financing     Trust Fund Contribution		00 May Be led to Fees	
Zip	Country	1,	Zip	Co	untry	'	8. This corporation has liability for i			
24	25	29		30			1 ' -	Yes No	J. J. 100.00E.,	
	9. Name and Address of Cu	rrent Regis	stered Agent				10. Name and Address of New Re	gistered Agent		
					81	Name				
PADGETT, SUSAN W				B2	Street Add	ddress (P.O. Box Number is Not Acceptable)				
9601 SW FOX BROWN ROAD						<del></del>	,			
INDIAN	TOWN FL 34956				83					
					84	City		85 2	Zip Code	
11. Pursuant	to the provisions of Sections 617	0502 and 6	17 1508 Florida Statu	toe the c	bove	-nemed co	encyation cultoffe this statement for the	FL 60 '	a ita rasintara d	
office or r	egistered agent, or both, in the S	ate of Flori	da. Such change was	authorize	d by	the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	orpose of changir of the appointment	ig its registered	
	on ramiliar with, and accept the or	oligations o	i, Section 617.0503, F	iorida Sta	itutes	<b>3</b> .	· ·			
SIGNATURE ,	Signature, typed or printed name of registered	agent and tille	if applicable. (NO	TE: Registeri	ed Age	ni signature requ	ured when reinstating)	DATE		
12.	OFFICERS			13.	<del>-</del>		ADDITIONS/CHANGES TO OFFIC		TORS IN 12	
TITLE	ASAD DELETE		DELETE	1,1 TOTLE				☐ Chan	nge 🔲 Addition	
NAME	PADGETT, SUSAN W			1,2 6	IAME					
STREET ADDRESS	10510 SE JUPITER NARO	ws drive	•	1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	HOBE SOUND FL			1.40	aty-\$	T-ZIP				
TITLE	PD		☐ DELETE	2.1 7	ITLE		ATD	Chan	nge Addition	
NAME	TAYLOR, WILLIAM J				2.2 NAME		TAYLOR, WILLIAM J			
STREET ADDRESS	1 BAYVIEW COURT			2.3 \$	TREET	ADDRESS	1 Bayview Court			
CITY-ST-ZIP	TEQUESTA FL			2.40	CITY-S	ST-ZIP	Tequesta, fla.			
TITLE	STD		☐ DELETE	3.1 T	ITLE		TD	K Chan	ge Addition	
NAME	BLOCK, CAROL T			3.2 N	IAME		BLOCK Carol T	·		
STREET ADDRESS	179 RIVER DRIVE			3.3 \$	TREET	ADDRESS	179 River Drive			
CITY-ST-ZIP	TEQUESTA FL			3.4. (	CITY-S	ST-ZIP	Tequesta, Fla.			
TIŦL€			DELETE	4.1 T	ITLE		PD	☐ Chan	ge 🗶 Addition	
NAME			ν,	4.21	NAME		Dr. Henry Edwards			
STREET ADDRESS				4.3 5	TREET	ADDRESS	2465 SE Gowin Drive Port St. Lucie, fla.			
CITY - ST - ZIP			T I never		ITY-S	T-21P				
TITLE			☐ DELETE	5.1 (			SD Deb Clouse	☐ Chan	ige K Addition	
NAME				1	iame 		Deb Clouse 944 Clayton Drive			
STREET ADDRESS						ADDRESS	Worthington, Ohio			
CITY-ST-ZIP			DELETE		TY-S	T-ZIP	VPD	——————————————————————————————————————	71 8 2 2 2 2	
TITLE			T DECEIE	6.1 T			Tom Lewis	☐ Chan	ge K Addition	
NAME STREET ADDRESS				4	AME TOTET	ADDOCCC	11246 Riverwood Plac	e	•	

4. I do 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that my an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name hard in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

ATURE:

STREET ADDRESS

North Palm Beach, Fla.

**FILED** 

Apr 18 1997 8:00am

Secretary of State