

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 AM 10:46

DOCUMENT # N93000005041 (9)

1. Corporation Name

RUSTIC RANCHES LANDOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O BOOSE, CASEY, CIKLIN, ET AL
515 N FLAGLER DRIVE, 17TH FLOOR
WEST PALM BEACH FL 33401

C/O BOOSE, CASEY, CIKLIN, ET AL
515 N FLAGLER DRIVE, 17TH FLOOR
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/08/1993

3a. Date of Last Report

04/27/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KINO, GREGORY S
C/O BOOSE, CASEY, CIKLIN, ET AL
515 N FLAGLER DRIVE, 17TH FLOOR
WEST PALM BEACH FL 33401

81 Name

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

83

84 City

FL

85 Zip Code

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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PIGADIS, ELIZABETH J
STREET ADDRESS	16198 RUSTIC ROAD
CITY - ST - ZIP	LOXAHATCHEE FL 33470
TITLE	VD
NAME	LANDRY, RENE F
STREET ADDRESS	16198 RUSTIC ROAD
CITY - ST - ZIP	LOXAHATCHEE FL 33470
TITLE	SD
NAME	BRIGGS, MICHAEL R
STREET ADDRESS	2851 FLYING COW RANCH ROAD
CITY - ST - ZIP	LOXAHATCHEE FL 33470
TITLE	TD
NAME	JOHNSON, SANDRA F
STREET ADDRESS	16840 DEER PATH LANE
CITY - ST - ZIP	LOXAHATCHEE FL 33470
TITLE	VD
NAME	MERRIAM, FRANK
STREET ADDRESS	16229 RUSTIC RD
CITY - ST - ZIP	LOXAHATCHEE FL 33470
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	☐ Change ☐ Addition
1 2 NAME	
1 3 STREET ADDRESS	
1 4 CITY - ST - ZIP	
2 1 TITLE	☒ Change ☐ Addition
2 2 NAME	Phyllis Reisman
2 3 STREET ADDRESS	16720 Hollow Tree Lane
2 4 CITY - ST - ZIP	LOXAHATCHEE, FL 33470
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	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), 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 I am 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sandra F. Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/95

407 790 4977