2002 UNIFORM BUSINESS REPORT (UBR)

DOMONIE REDUC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

DOCUMENT # P0000014046 1. Entity Name HI-B RANCH, INC. Principal Place of Business 20641 STATE ROAD 19 HOWEY-IN-THE-HILLS FL 34737 Mailing Address POST OFFICE BOX 65 HOWEY-IN-THE-HILLS FL 34737						Secretary of State 02-01-2002 90003 050 ***150.00			
2. Principal Pl	ace of Business	3. Mailing Address			:				
Suite, Apt.	#, etc	Suite; Apt. #, etc.				====	SPACE	¢ ,	
City & State	9	City & State			4. F	El Number 59-3631788		plied For t Applicable	
Zip	Country	Zip	Country		5. (Certificate of Status Desired	\$8.75 Addi		
-	6. Name and Address of Current	Registered Agent			7. N	Name and Address of New Registered	Agent		
			,	Name	'A c'm-				
BRADSHAW, CHARLES E III 20841 STATE ROAD 19				Street Address (P.O. Box Jum Sell Ann Acceptable)					
HOWEY-II	N-THE-HILLS FL 34737			City		F	Zip Code)	
	named entity submits this statement fo			-1 - \$6'			<u> </u>		
SIGNATURE _	Signature, typed or printed name of registered agent praction is eligible to satisfy its Intangible	and title it applicable. (NOTE	E: Registered	Agent signature	a required when re	pinstating) DATE			
	equirement and elects to do so.	After May 1, 20 Make Check Payab	02 Fee v	vill be \$55	0.00 of State	10. Election Campaign Financing Trust Fund Contribution.	Added	May Be to Fees	
11.	OFFICERS AND		12.			DITIONS/CHANGES TO OFFICERS AN			
TITLE* NAME STREET ADDRESS	D Bradshaw, Charles e III 20841 State Road 19 Howey-In-The-Hills Fl 34737	☐ Delete		T ADDRESS ST-21P	2084	IAW, Charles E.III 11 StateRogo 19 4-11-44EH:115FL 34	 Change フタフ	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	HOWEI-IN-THE-FILLS FE 34737	☐ Delete	TITLE NAME STREE	T ADDRESS	BAAR	1512AW, Phorbe S.	☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREE	ST-ZIP T ADDRESS ST-ZIP	House	rin the-HillsFL	☐ Change	Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREE				☐ Change	Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREE	-			☐ Change	☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE				☐ Change	Addition	
indicated of the cor changed	l this case are an arrandamental research is	s true and accurate and that r owered to execute this report	my signati : as requir	uro chall be	ue the came.	119.07(3)(i), Florida Statutes. I further or legal effect as if made under oath; that ida Statutes; and that my name appear	I am an omicer	or alrector	

Date Daytime Phone #