

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90986 008 ***150.00

DOCUMENT # P00000022531

1. Entity Name

RANSON'S RUNNING ON FAITH FARM, INC.

Principal Place of Business

**4504 WILKERSON BLUFF
HOLT FL 32564**

Mailing Address

**4504 WILKERSON BLUFF
HOLT FL 32564**

2. Principal Place of Business

7276 Tidwell

Suite, Apt. #, etc.

3. Mailing Address

7276 Tidwell

Suite, Apt. #, etc.

City & State

Pace, FL

City & State

Pace, FL

Zip

32571

Country

USA

Zip

32571

Country

USA

4. FEI Number

59-3625930

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**AURORA TAX AND BOOKKEEPING, INC.
1455 SOUTH FERDON BLVD. SUITE A-1
CRESTVIEW FL 32539**

7. Name and Address of New Registered Agent

Name

Richard L. Ranson

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

7276 Tidwell

City

Pace

FL

Zip Code

32571

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.

SIGNATURE

Richard L. Ranson

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-27-01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	RANSON, RICHARD L	
STREET ADDRESS	4504 WILKERSON BLUFF	
CITY-ST-ZIP	HOLT FL 32564	
TITLE	VPT	<input checked="" type="checkbox"/> Delete
NAME	RANSON, TRACI D	
STREET ADDRESS	4504 WILKERSON BLUFF	
CITY-ST-ZIP	HOLT FL 32564	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ranson, Richard L	
STREET ADDRESS	7276 Tidwell	
CITY-ST-ZIP	Pace, FL 32571	
TITLE	VPT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ranson, Traci D.	
STREET ADDRESS	7276 Tidwell	
CITY-ST-ZIP	Pace, FL 32571	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard L. Ranson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

4/27/01

Date

Daytime Phone #

CR2E034 (10/00)