2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# P02000116722

Entity Name: BIG BUCK RANCH, INC.

Current Principal Place of Business:

5409 COTEE RIVER DR
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

5409 COTEE RIVER DR
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 54-2086048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWARTSEL, MARK
5409 COTEE RIVER DR
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SWARTSEL, MARK
Address: 5409 COTEE RIVER DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP ( ) Delete
Name: ROBINSON, LOIS E
Address: 6067 OLEANDER AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP ( ) Delete
Name: SEVERS, HUGH
Address: 2091 N. POINTE ALEXIS DR.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: T ( ) Delete
Name: ODOM, JASON B
Address: 11506 JOSHUAS BEND DR
City-St-Zip: TAMPA, FL 33612

Title: S ( ) Delete
Name: BRADLEY, THOMAS B
Address: 5012 W CYPRESS ST
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: SWARTSEL, MARK E
Address: 5409 COTEE RIVER DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK E. SWARTSEL DP 03/27/2009

Electronic Signature of Signing Officer or Director — Date