

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P06000067418

1. Entity Name
WARD RANCH & CATTLE CO.



**FILED
May 01, 2008 8:00 am
Secretary of State**

05-01-2008 90239 034 ***150.00

Principal Place of Business
3101 S OCEAN DRIVE
UNIT #2808
HOLLYWOOD, FL 33019

Mailing Address

PO BOX 1388
GLENMORA, CA 91740

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

3101 S. OCEAN DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

UNIT #2808

City & State

City & State

HOLLYWOOD, FL

Zip

Zip

33019

Country

04172008 Chg-P CR2E034 (12/06)

4. FEI Number
86-1168499

Applied For

Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZELMAN, DEBRA L
8000 PETERS ROAD
#A200
PLANTATION, FL 33324

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME WARD, WESLEY
STREET ADDRESS 3101 S OCEAN DRIVE, UNIT #2808
CITY-ST-ZIP HOLLYWOOD, FL 33019

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition

TITLE D
NAME WARD, KIMBERLY
STREET ADDRESS 3101 S OCEAN DRIVE, UNIT #2808
CITY-ST-ZIP HOLLYWOOD, FL 33019

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition

TITLE D
NAME HEAP, BLAKE
STREET ADDRESS 3101 S OCEAN DRIVE, UNIT #2808
CITY-ST-ZIP HOLLYWOOD, FL 33019

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

4.24.08

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #