

2007 FOR PROFIT CORPORATION ANNUAL REPORT (A/R)

FILED
Feb 15, 2007 8:00 am
Secretary of State

01-24-2007 90048 018 ***150.00

DOCUMENT # P06000125577 1. Entity Name JUDI'S BIG DOG RANCH, INC.																																													
Principal Place of Business 11334 81ST COURT NORTH WEST PALM BEACH FL 33412			Mailing Address 11334 81ST COURT NORTH WEST PALM BEACH FL 33412																																										
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																											
City & State		City & State																																											
Zip	Country	Zip	Country	4. FEI Number 20-5640618																																									
5. Certificate of Status Desired <input type="checkbox"/>				<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																									
6. Name and Address of Current Registered Agent STIFF, JUDITH 11334 81ST COURT NORTH WEST PALM BEACH FL 33412			7. Name and Address of New Registered Agent 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 <u><i>Judith A Stiff</i></u> 1/18/07 <small>Signature, typed or printed name of registered agent not valid, applicable (NOTE: For registered Agent signature required when re-registering)</small>																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">NAME</td> <td style="width: 10%;">Delete <input type="checkbox"/></td> </tr> <tr> <td></td> <td>DPST STIFF, JUDITH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>11334 81ST COURT NORTH</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>WEST PALM BEACH FL 33412</td> <td></td> </tr> </table>			TITLE	NAME	Delete <input type="checkbox"/>		DPST STIFF, JUDITH		STREET ADDRESS	11334 81ST COURT NORTH		CITY- ST- ZIP	WEST PALM BEACH FL 33412		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">NAME</td> <td style="width: 10%;">Change <input type="checkbox"/></td> <td style="width: 10%;">Addition <input type="checkbox"/></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>			TITLE	NAME	Change <input type="checkbox"/>	Addition <input type="checkbox"/>																								
TITLE	NAME	Delete <input type="checkbox"/>																																											
	DPST STIFF, JUDITH																																												
STREET ADDRESS	11334 81ST COURT NORTH																																												
CITY- ST- ZIP	WEST PALM BEACH FL 33412																																												
TITLE	NAME	Change <input type="checkbox"/>	Addition <input type="checkbox"/>																																										
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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																																													
SIGNATURE: <u><i>Judith A Stiff</i></u> JUDITH A STIFF 1/18/06 561346-0227 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																													