## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jan 25, 2001 8:00 am DOCUMENT # P93000011302 **Secretary of State** EL RANCHO HUNTING PRESERVE, INC. 01-25-2001 90007 043 \*\*\*150.00 Principal Place of Business Mailing Address 2153 COON HOLLOW TRAIL 2153 COON HOLLOW TRAIL CHIPLEY FL 32428 CHIPLEY FL 32428 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3172113 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YATES, REX T Street Address (P.O. Box Number is Not Acceptable) 2153 COON HOLLOW TRAIL CHIPLEY FL 32428 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITI F ☐ Addition NAME YATES, REX T NAME STREET ADDRESS STREET ADDRESS 2153 COON HOLLOW TRAIL CITY-ST-ZIP CITY-ST-ZIP CHIPLEY FL 32428 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-7/P

Key T. Yates Rex T. YATES
SIGNATURE AND TYPED OR PRIVITED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 9 2001 850-638-1075