

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000016062 (9)

1. Corporation Name
BAR-W RANCH, INC.



Principal Place of Business

~~404 ALEXANDER STREET~~
PLANT CITY FL 33566

Mailing Address

~~404 ALEXANDER STREET~~
PLANT CITY FL 33566

3. Date Incorporated or Qualified
02/28/1994

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 8494 LUPTON PLACE

2a. Mailing Address

26 SAME

4. FEI Number

59-3227272

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

22 City & State

23 PLANT CITY, FL

27 City & State

28

24 Zip

33567

25 Country

HILLSBOROUGH

29 Zip

30

30 Country

30

9. Name and Address of Current Registered Agent

WOOD, BARBARA

~~404 ALEXANDER STREET~~
PLANT CITY FL 33566

ADDRESS CHANGE ONLY

10. Name and Address of New Registered Agent

81 Name

BARBARA WOOD

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

8494 LUPTON PLACE

83

84 City

PLANT CITY

85 State

FL

86 Zip Code

33567

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(If 011, Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D WOOD, BARBARA
404 ALEXANDER STREET
PLANT CITY FL 33566

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V JACOBS, EDGAR A.
8494 LUPTON PLACE
PLANT CITY FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edgar A. Jacobs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/96
Date

813-752-6000
Daytime Phone #

CR2E034 (12/95)