

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000017593

Entity Name: WOLF CREEK RANCH, INC.

FILED
Apr 22, 2005
Secretary of State

Current Principal Place of Business:

2031 US 27 SOUTH
SEBRING, FL 33875 US

New Principal Place of Business:

Current Mailing Address:

2031 US 27 SOUTH
SEBRING, FL 33875 US

New Mailing Address:

FEI Number: 65-0480395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAUNCEY, HARRISON K. J
241 BRADLEY PLACE
PALM BEACH, FL 34880 US

Name and Address of New Registered Agent:

PALADINO, RICHARD
505 SOUTH FLAGLER DRIVE
1330
WEST PALM BEACH, FL 33401 US

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: RICHARD PALADINO

04/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KAUPPE, SANDRA T
Address: 1185 NORTH LAKE WAY
City-St-Zip: PALM BEACH, FL

Title: EVT () Delete
Name: WILSON, DON A.
Address: 260 EDMORE ROAD
City-St-Zip: WEST PALM BEACH, FL

Title: VS (X) Delete
Name: CHAUNCEY, HARRISON JR
Address: 1921 EMBASSY DRIVE
City-St-Zip: WEST PALM BEACH, FL

Title: VP () Delete
Name: BRANCH, FRANK
Address: 261 ATLANTIC AVENUE
City-St-Zip: PALM BEACH, FL

Title: VP () Delete
Name: VICKERS, JESSIE S.
Address: 4400 WYE RIVER ROAD
City-St-Zip: KENANSVILLE, FL

Title: S () Delete
Name: SKWIERC, CYNTHIA F
Address: 8625 BURMA RD
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: KAUPPE, SANDRA T
Address: 1185 NORTH LAKE WAY
City-St-Zip: PALM BEACH, FL

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANDRA T. KAUPPE

P

04/22/2005

Electronic Signature of Signing Officer or Director

Date