SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE PROFIT Sandra B. Mortham CORPORATION Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 DOCUMENT # P94000019312 (5) PINE ACRES RANCH, INC. Mailing Address Principal Place of Business 1195 NW 165TH ST 1195 NW 165TH ST (MILLWOOD RD.) (MILLWOOD RD.) 3a. Date of Last Report 3. Date incorporated or Qualified CITRA FL 32113 **CITRA FL 32113** 07/27/1995 US 03/11/1994 Applied For 4. FEI Number Mailing Address 2. Principal Place of Business Not Applicable 59-3229498 26 \$8.75 Additional 21 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Suite, Apt. #, etc. 27 \$5.00 May Be 22 Flection Campaign Financing City & State Added to Fees City & State Trust Fund Contribution 28 This corporation has liability for intangible tax under s. 199.032 23 Country Z_{10} Yes No Country Ζıp Florida Statutes 30] 29 25 10. Name and Address of New Registered Agent 24 9. Name and Address of Current Registered Agent Name 81 HUDSON, WILLIAM J JR. Street Address (P.O. Box Number is Not Acceptable) 82 9250-3 COLLEGE PARKWAY FT MYERS FL 33919 83 Zip Code 85 84 City FL 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes. [IATE (Paritic Berg sterred Agent's gloature regudiwhen repairables SIGNATURE Signature appoints product con ending strend a percaretter chapple accer (3/96)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Addition Change 12. 11 1100 DELETE CR2E034 TITLE 1.2 NAM6 VIGNE, CHARLES R 1 3 STREET ADDRESS 1195 NW 165TH ST STREET ADDRESS 1 4 CITY - ST - ZIP Change Addition CITRA FL CITY - S1 - ZIP DELFTE 2.1 THUE TIFLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIF Change Add-bon CITY-ST-ZIP DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - 7IP Change Addition CITY - ST - ZIP DEFELE 4.1 TillE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP Change Addition CITY - ST - ZIF DELETE 51 THE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 200001888902gange Addition -07/10/96--01013--034 5.4 CITY - ST - 7IP CITY - ST - ZIP DELETE 6.1.7(1).6 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS ***225.00 STREET ADDRESS 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 each that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: