SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # P95000064390 (4) **ROCKY RIDGE RANCH PRODUCTIONS. INC.** Mailing Address Principal Place of Business 2549 NEWBOLT DR. 2549 NEWBOLT DR. ORLANDO FL 32817 ORLANDO FL 32817 3a. Date of Last Report 3. Date Incorporated or Qualified 08/21/1995 Applied For FEt Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Zipi Country Zip Yes 🔀 No Florida Statutes 29 30 25 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD Street Address (P.O. Box Number is Not Acceptable) 82 343 ALMERIA AVENUE Newbelt **CORAL GABLES FL 33134** В3 Zip Code 3281つ 85 84 City Ochado 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 of the or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors, it hereby accept the appointment as registered agent. I am temilitar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE

Signate hoed or problem to obligation and the interpretation and the interpretation of the problem of the interpretation of the interp ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)OFFICERS AND DIRECTORS 13. 12 Change Addition DELETE 1 1 7:TLE TITLE CR2E034 1.2 NAME BLANKENSHIP, SUZANNE NAME 820 EAST STATE ROAD 434, SUITE 180 1.3 STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 14 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1.1011.6 TITLE BLANKENSHIP, EUGENE C JR. 2.2 NAME NAME 820 EAST STATE ROAD 434, SUITE 180 2.3 STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 2 4 CITY - ST-ZIP CITY-ST-ZIP Change Add-tion DELETE 3.1 TYLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 51 TiTLE

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 617, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed. If k on an attachment with an address pron an attachment with an address that my name appears in Block 12 or Block

5 2 NAME 5.3 STREET ADDRESS

6 1 TITLE

6.2 NAME

5 4 CITY - ST - ZIP

63 STREET ADDRESS

6 4 CHY - ST - ZIP

SIGNATURE: 5

TIFLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

PRINTED NAME OF SCHOOL STEER C. Blankenship Jane 15 96 407 678-8621

DELETE

Change Addition