

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 12, 2006 8:00 am**  
**Secretary of State**

07-12-2006 90006 016 \*\*\*150.00

**DOCUMENT # P96000103348**

1. Entity Name  
**MAGNOLIA RANCH INC.**



Principal Place of Business  
 P.O. BOX 247  
 305 CORAL FARMS ROAD  
 FLORAHOME, FL 32140

Mailing Address  
 P.O. BOX 247  
 305 CORAL FARMS ROAD  
 FLORAHOME, FL 32140

**50022227**



2. Principal Place of Business

**136 Karen Ct**

3. Mailing Address

**136 Karen Ct**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07102006 Chg-P CR2E034 (11/05)

City & State  
**Palatka FL**

City & State  
**Palatka FL**

4. FEI Number  
**59-3418062**

Applied For  
 Not Applicable

Zip  
**32177**

Country  
**USA**

Zip  
**32177**

Country  
**USA**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**VARNES, TRACY M**  
 P.O. BOX 247  
 305 CORAL FARMS ROAD  
 FLORAHOME, FL 32140

7. Name and Address of New Registered Agent

Name

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

**136 Karen Court**

City

**Palatka**

**FL**

Zip Code

**32177**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD  Delete  
 NAME **VARNES, TRACY M**  
 STREET ADDRESS **305 CORAL FARMS RD.**  
 CITY-ST-ZIP **FLORAHOME, FL 32140**

TITLE V  Delete  
 NAME **VARNES, DARRELL**  
 STREET ADDRESS **305 CORAL FARMS RD**  
 CITY-ST-ZIP **FLORAHOME, FL 32140**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  Change  Addition  
 NAME **136 Karen Ct**  
 STREET ADDRESS **Palatka FL 32177**  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
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TITLE  Change  Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Tracy M. Varnes*

Date

**7/10/06**

Daytime Phone #

**386-312-8510**

ATTACHMENT

50022227  
#P96000103348

7/10/06

To Whom It May Concern:

My husband and I just went thru a divorce in April after 22 years of marriage. He was getting the mail and I did not get the renewal form for this.

With all the confusion, I did not think about this until now. I apologize for the delay.

I am asking for a reduction in the late fees due to my situation.

Thank you for your consideration,

Tracy Varnes, President

Magnolia Ranch Inc.

136 Karen Court

Palatka, FL 32177

ID# 59-3418062