FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

OCHMENT # 29700

FILED Jun 04 1998 8:00am Secretary of State

Champion Ranch, Inc.							
Principal Place of Busine	ess	Mailing Address			_		
					DO NOT WRITE IN THE	S SPACE	
					3. Date Incorporated or Qualified		
2. Principal Place of Business 2s. Mailing Address					4. FEI Number	Applied For	
14338 NE 5 Avenue		26 4338 NE S Avenuc		65-0742478	Not Applicable		
Suite, Apt. #, etc.		Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State Cokland Pork, F-L		City & State 28 Oakland Fork, FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country		This corporation owes or has paid the control of the control		
4 33334	25 U.S.A	29 33334	30 US/	\	Personal Property Tax due June 30.	☐ Yes ☐ No	
	e and Address of Curren	t Registered Agent		1-5	10. Name and Address of New Registere	d Agent	
Christopher A. Gormon				Name	ame		
				82 Street Address (P.O. Box Number is Not Acceptable)			
4338 NE & Avenue							
Oakland Ye	rk, FL 5333	4	84	City		85 Zip Code	
· · · · · · · · · · · · · · · · · · ·					F	<u>L</u> ` _ '	
office or registered a	igent, or both, in the State	of Florida. Such change wa	is authorized b	y the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered	
•	with, and accept the obliga	ations of, Section 607 0505,	Florida Statute	S.			
SIGNATURE Signature, type	ed or printed name of registered age	t and the it applicable (N	IO1E: Registered Ag	ont signature requ	pred when reinstating) DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE PID						☐ Change ☐ Addition	
Christophen A.Gorman			1.2 NAME	1000000			
REET ADDRESS 4338 N.E. S. AVENUE TY-ST-ZIP Oblica Fork, FL 13334			1.3 STREET	ADDRESS			
THILE	na rois TE	DFLETE	2.1 TiTLE	51 - ZIP		Change Addition	
NAME			2.2 NAME			_ •	
STREET ADDRESS			2 3 STREET	ADDRESS			
CITY+ST-ZIP			2. 4 CITY-	ST-ZIP		·	
TITLE		[_] DELETE	31 TITLE			Change Addition	
NAME		j	3.2 NAME			1	
STREET ADDRESS		1		ADDRESS		/ /	
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	01-711-		Change Addition	
NAME		1	4. 2 NAME		$\mathcal{M}_{\mathcal{M}}$	11/11	
STREET ADDRESS		- 1	4.3 STREET	ADDRESS	47	10/1/	
CITY-ST-ZIP			4.4 City- s	ST - ZIP	//	199	
TITLE		↑ □ DELETE	5 1 TITLE			Change Addition	
NAME			5 2 NAME				
STREET ADDRESS	ı		5.3 STREET				
CITY-ST-ZIP		Drugge	5.4 CITY - 9	ST - ZiP		Chouse Laster	
TITLE		DELETE	6.1 TITLE		5000025518	Change Addition	
NAME PROCET ADDRESS	/ \ \		6.2 NAME	4000500	-06/08/9801131		
STREET ADDRESS	/ 1		6.3 STREET		***150.00		
CITY-ST-ZIP 14. I hereby certify that t	he information supplied w	it this filing does not qualify	6.4 CITY-S	tion stated in		certify that the information	
indicated on this arm officer or director of Block 12 or Block 13	nual report or supplementa the corporation of the lece if changed, or on an attac	l vinnual report is true and a siver or trustee ompowered shipent with ap address.	ccurate and the execute this	at my signati report as req	Section 119.07(3)(i), Florida Statules. I further ure shall have the same legal effect as if made juired by Chapter 607, Florida Statutes; and tha	under oath; that I am an It my name appears in	