

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

FILED  
May 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000044304 (8)

1. Corporation Name  
DOUBLE D RANCH, INC.

Principal Place of Business

919 WEST BLOXHAM STREET  
LANTANA FL 33462

Mailing Address

919 WEST BLOXHAM STREET  
LANTANA FL 33462



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/19/1997	
21		26		4. FEI Number 65-0770063	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

COLLIER, CARL M ESQ  
2945 SOUTH CONGRESS AVENUE  
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent

81. Name	DAVID COATES
82. Street Address (P.O. Box Number is Not Acceptable)	919 WEST BLOXHAM ST
83.	
84. City	LANTANA
85. Zip Code	FL 33462

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(President)

(NOTE: Registered agent signature required when reinstating)

DATE

4/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	1.1 TITLE	
NAME	DAVID COATES	1.2 NAME	
STREET ADDRESS	919 WEST BLOXHAM ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	W.P.B. FL 33462	1.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT	2.1 TITLE	
NAME	GARY GARNETT	2.2 NAME	
STREET ADDRESS	908 SOUTH MILITARY TR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	W.P.B. FL 33415	2.4 CITY-ST-ZIP	
TITLE	DAVID BENJAMINS	3.1 TITLE	
NAME	SECRETARY	3.2 NAME	
STREET ADDRESS	1080 COTTON BAY DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	W.P.B. FL 33415	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

(Signature)

CR2E034 (10/97)