

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 26, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000052460**

1. Entity Name

CARLIN RANCH, INC.



Principal Place of Business  
6246 RAVENWOOD DR E  
SARASOTA FL 34243

Mailing Address  
6246 RAVENWOOD DR E  
SARASOTA FL 34243



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

City & State

4. FEI Number  
59-2000883

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARLIN, G. PETER  
6246 RAVENWOOD DR E  
SARASOTA FL 34243

Name

Street Address (P O Box Number is Not Acceptable)

City

FL

Zip Code

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 terminating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees  
Trust Fund Contribution. ☐

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME CARLIN, G. PETER  
STREET ADDRESS 6246 RAVENWOOD DR E  
CITY- ST- ZIP SARASOTA FL 34243

TITLE ☐ Change ☐ Add  
NAME U000000402455  
STREET ADDRESS 02/03/06-80008-023 150.00  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME CARLIN, JUDITH F  
STREET ADDRESS 6246 RAVENWOOD DR E  
CITY- ST- ZIP SARASOTA FL 34243

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME CARLIN, PETER  
STREET ADDRESS 2913 W BAY CT AVENUE  
CITY- ST- ZIP TAMPA FL 33611

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME CARLIN, STEVE  
STREET ADDRESS 6246 RAVENWOOD DR  
CITY- ST- ZIP SARASOTA FL 34243

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Add  
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 Section 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

Date

Daytime Phone #

G. PETER CARLIN

1/24/06

941/355-5573