2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2012
Secretary of State

DOCUMENT# P99000019646

Entity Name: BLACK RIVER RANCH, INC.

Current Principal Place of Business:

3353 SE GRAN PARK WAY
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

3353 SE GRAN PARK WAY
STUART, FL 34997

New Mailing Address:

FEI Number: 65-0906487 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROOK, T. MICHAEL ,CPA
33 FLAGLER AVENUE
STUART, FL 34994 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: CIFERRI, RENEE
Address: 3353 SE GRAN PARK WAY
City-St-Zip: STUART, FL 34997

Title: D
Name: CIFERRI, MICHAEL SR
Address: 3353 GRAN PARK WAY
City-St-Zip: STUART, FL 34997

Title: O
Name: MEIRA, DANEILLE
Address: 3353 GRAN PARK WAY
City-St-Zip: STUART, FL 34997

Title: O
Name: SCOTT, CATHERINE
Address: 3353 GRAN PARK WAY
City-St-Zip: STUART, FL 34997

Title: O
Name: CIFERRI, JESSICA
Address: 3353 GRAN PARK WAY
City-St-Zip: STUART, FL 34997

Title: O
Name: MICHAEL, CIFERRI JR
Address: 3353 GRAN PARK WAY
City-St-Zip: STUART, FL 34997

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RENEE CIFERRI D 04/10/2012

Electronic Signature of Signing Officer or Director Date