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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S18355

(5)

61 RANCH, INC.

FILED Apr 30 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		1 10001000 176 (1400) 170100 37161 01100 6(1)	01014 01044 01014 01011 B3011 1001
875 SKIPPER RANCH ROAD LAKE PLACID FL \$3852 US		875 SKIPPER RANCH ROAD LAKE PLACID FL 33852 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				12/10/1990	
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21 26		26		59-3042814	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27					Fee Required
<del>}</del> 1 '		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Country		Country	8. This corporation owes or has paid the	Added to Fees
24	25	_	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curren			10. Name and Address of New Register	
SKI	IPPER, JACK				
875 SKIPPER RANCH ROAD			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SEBRING FL-00072					
Lake Placid, Fl 33852			83		
İ	,		84 City		85 Zip Code
FL 65 210 Code  44 Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above named corporation submits this statement for the purpose of shanging the registered					
11. Pursuant to the provisions of Soctions 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 (NOTE: Registered Agent				red when reinstating) DA	E
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	0	☐ DELETE	1.1 TITLE		Change Addition
NAME	SKIPPER, JACK		1.2 NAME		
STREET ADDRESS	675 SKIPPER RANCH RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	LAKE PLACID FL D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	SKIPPER, CAROL		2.2 NAME		Change Cyrothian
STREET ADDRESS	875 SKIPPER RANCH RD.		2.3 STREET ADDRESS	e e e	
CITY-ST-ZIP	LAKE PLACID FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		The section	3.4. CITY-ST-ZIP		
TITLE		☐ DELET <b>E</b>	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME		<del></del>	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELE <b>te</b>	6.1 TITLE		Change Addition
NAME			6.2 NAME		İ
STREET ADDRESS	,		6.3 STREET ADDRESS		
CITY-ST-ZIP	artify that the information a united w	ith this filing does not availed	6.4 CITY - ST - ZIP	Cootion 110 07/2Vi). Florida Ctatutas 14 office	

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.