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FILED

Jan 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S85553 (3)

1. Corporation Name  
J & E RANCH, INC.

Principal Place of Business  
200 N. ORANGE AVE.  
FT. MEADE FL 33841

Mailing Address  
200 N. ORANGE AVE.  
FT. MEADE FL 33841



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/07/1991	
4. FEI Number 59-3127097	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

MCKINNISH, CYNTHIA M.  
200 N. ORANGE AVE.  
FT. MEADE FL 33841

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	P	1.1 TITLE	
NAME	MCKINNISH, JAMES R.	1.2 NAME	
STREET ADDRESS	200 N. ORANGE AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MEADE FL 33841	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	COLLIER, EDGAR EUGENE	2.2 NAME	
STREET ADDRESS	713 NE 3RD ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. MEADE FL 33841	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	MCKINNISH, CYNTHIA M.	3.2 NAME	
STREET ADDRESS	200 N. ORANGE AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MEADE FL 33841	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	COLLIER, BETTY	4.2 NAME	
STREET ADDRESS	713 NE 3RD STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MEADE FL 33841	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 in Block 13 if added, with an address.

SIGNATURE:

*James R. McKinnish*  
James R. McKinnish - Pres 1-2-98

Date

Daytime Phone #

0419384

CR2E034 (10/97)