

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S99381

Entity Name: BEXLEY RANCH, INC.

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

3649 CR 214
OXFORD, FL 34484 US

New Principal Place of Business:

547 CR 501
WILDWOOD, FL 34785 US

Current Mailing Address:

P.O. BOX 469
OXFORD, FL 34484 US

New Mailing Address:

P. O. BOX 10
SUMTERVILLE, FL 33585 US

FEI Number: 59-3097320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEXLEY, PATRICK B.
6332 WISTERIA LP
LAND O'LAKES, FL 34639 US

Name and Address of New Registered Agent:

BEXLEY, PATRICK B.
547 CR 501
WILDWOOD, FL 34785 US

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: PATRICK B BEXLEY

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ESTATE OF SOLON C. B, EXLEY, JR.
Address: P.O. BOX 469
City-St-Zip: OXFORD, FL 34484

Title: D () Delete
Name: ESTATE OF PATRICIA B, . BEXLEY
Address: P.O. BOX 469
City-St-Zip: OXFORD, FL 34484

Title: D () Delete
Name: BEXLEY, CRAIG L.,
Address: P.O. BOX 469
City-St-Zip: OXFORD, FL 34484

Title: D () Delete
Name: BEXLEY, PATRICK B.,
Address: P.O. BOX 469
City-St-Zip: OXFORD, FL 34484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ESTATE OF SOLON C. B, EXLEY, JR.
Address: P.O. BOX 10
City-St-Zip: SUMTERVILLE, FL 33585

Title: D (X) Change () Addition
Name: ESTATE OF PATRICIA B, . BEXLEY
Address: P.O. BOX 10
City-St-Zip: SUMTERVILLE, FL 33585

Title: D (X) Change () Addition
Name: BEXLEY, CRAIG L.,
Address: P.O. BOX 10
City-St-Zip: SUMTERVILLE, FL 33585

Title: D (X) Change () Addition
Name: BEXLEY, PATRICK B.,
Address: P.O. BOX 10
City-St-Zip: SUMTERVILLE, FL 33585

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICK B BEXLEY

D

04/24/2008

Electronic Signature of Signing Officer or Director

Date