

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90093 018 ***150.00

DOCUMENT # V14703 1. Entity Name BULLS-HIT RANCH & FARM, INC.					
Principal Place of Business 9165 HASTINGS-PALATKA ROAD HASTINGS, FL 32145			Mailing Address 9165 HASTINGS-PALATKA ROAD HASTINGS, FL 32145		
2. Principal Place of Business - No P.O. Box # 9165 OLD HASTINGS ROAD Suite, Apt. #, etc.		3. Mailing Address 9165 OLD HASTINGS ROAD Suite, Apt. #, etc.			
City & State HASTINGS, FL		City & State HASTINGS, FL		4. FEI Number 59-3112800	
Zip 32145		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEE, THOMAS R 9165 HASTINGS-PALATKA ROAD HASTINGS, FL 32145			7. Name and Address of New Registered Agent Name LEE, THOMAS R. Street Address (P.O. Box Number is Not Acceptable) 9165 OLD HASTINGS ROAD HASTINGS, FL 32145 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 _____ (NOTE: Registered Agent signature required when transacting) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LEE, THOMAS R. ☐ Delete 9165 HASTINGS-PALATKA RD HASTINGS, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LEE, THOMAS R. ☒ Change ☐ Addition 9165 OLD HASTINGS ROAD HASTINGS, FL 32145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT LEE, SHARON ☐ Delete 9165 HASTINGS-PALATKA RD HASTINGS, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT LEE, SHARON ☒ Change ☐ Addition 9165 OLD HASTINGS ROAD HASTINGS, FL 32145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LEE, THOMAS R., JR. ☐ Delete 9165 HASTINGS-PALATKA RD HASTINGS, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LEE, THOMAS R., JR. ☒ Change ☐ Addition 9165 OLD HASTINGS ROAD HASTINGS, FL 32145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Thomas R Lee</u> THOMAS R. LEE			1-17-07 904692 2715		