

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763073

FILED
Jan 05, 2010
Secretary of State

Entity Name: THE RANCHES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9099 S THOROUGHbred PT.
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

9099 S THOROUGHbred PT.
P.O. BOX 0928
INVERNESS, FL 344510928

New Mailing Address:

FEI Number: 59-2244231 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCMULLEN, DAN E
9099 S THOROUGHbred DR
INVERNESS, FL 34452 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: TD
Name: KONKOI, PATRICIA
Address: 4590 E. COLT CT
City-St-Zip: INVERNESS, FL 34452

Title: PD
Name: MCMULLEN, DAN
Address: 9009 S. THOROUGHbred PT
City-St-Zip: INVERNESS, FL 34452

Title: SD
Name: MCMULLEN, JOYCE
Address: 9009 S. THOROUGHbred PT
City-St-Zip: INVERNESS, FL 34452

Title: D
Name: SANSONE, FRED
Address: 4703 E STALLION
City-St-Zip: INVERNESS, FL 34452

Title: VPD
Name: KONKOL, VICTOR
Address: 4590 E. CLOT CT
City-St-Zip: INVERNESS, FL 34452

Title: D
Name: SERRA, EDWARD
Address: 4649 E. COLT CT.
City-St-Zip: INVERNESS, FL 34452

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA KONKOL

TD

01/05/2010

Electronic Signature of Signing Officer or Director

Date