


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L93439
1. Entity Name
RANCHROAD CORPORATION, INC.



Principal Place of Business Mailing Address
3150 REPUBLIC BLVD., N. #2 **3150 REPUBLIC BLVD., N. #2**
TOLEDO, OH 43615 **TOLEDO, OH 43615**

DO NOT WRITE IN THIS SPACE



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
34-1656732 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

EVANS, RALPH L., ESQUIRE
2920 CARDINAL DRIVE
VERO BEACH, FL 32963

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when installing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

1100000387915
01/19/06-80053-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	ARNOS, RICHARD D.
STREET ADDRESS	3150 REPUBLIC BLVD N. #2
CITY-ST-ZIP	TOLEDO, OH
TITLE	SV
NAME	HENLINE, KATHY
STREET ADDRESS	3150 REPUBLIC BLVD N. #2
CITY-ST-ZIP	TOLEDO, OH
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: By: Kathy Henline, Secretary 1/12/06 419-841-7077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #