


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2007 08:00 A
Secretary of State

DOCUMENT # N03000000696 1. Entity Name DIP-N-VAT HUNTING CLUB, INC.		
Principal Place of Business 17356 SE 349 HWY. OLD TOWN, FL 32680	Mailing Address P.O. BOX 1448 OLD TOWN, FL 32680	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BRIDGES, JOHNNY A 17356 SW 349 HWY. OLD TOWN, FL 32680		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CORBIN, JEFF 252 NE 200 AVE OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DYALS, BENNY PO BOX 462 NA OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRIDGES, JOHNNY A 17356 SE 349 HWY. OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEEN, DAVID 923 NE 592 ST OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORBIN, WESLEY 31 SE 189 AVE OLD TOWN, FL 32680	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STROUP, BOBBY HC 3 BOX 242 OLD TOWN, FL 32680	
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 617, 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>Warren D. Corbin</u> <u>3-28-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



03262007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3618679	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**