

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000696

FILED
Apr 21, 2009
Secretary of State

Entity Name: DIP-N-VAT HUNTING CLUB, INC.

Current Principal Place of Business:

17356 SE 349 HWY.
OLD TOWN, FL 32680

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1448
OLD TOWN, FL 32680

New Mailing Address:

FEI Number: 59-3618679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRIDGES, JOHNNY A
17356 SW 349 HWY.
OLD TOWN, FL 32680 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: ST () Delete
Name: CORBIN, JEFF
Address: 252 NE 200 AVE
City-St-Zip: OLD TOWN, FL 32680

Title: VP () Delete
Name: DYALS, BENNY
Address: PO BOX 462 NA
City-St-Zip: OLD TOWN, FL 32680

Title: P () Delete
Name: BRIDGES, JOHNNY A
Address: 17356 SE 349 HWY.
City-St-Zip: OLD TOWN, FL 32680

Title: D () Delete
Name: KEEN, DAVID
Address: 923 NE 592 ST
City-St-Zip: OLD TOWN, FL 32680

Title: D () Delete
Name: CORBIN, WESLEY
Address: 31 SE 189 AVE
City-St-Zip: OLD TOWN, FL 32680

Title: D () Delete
Name: STROUP, BOBBY
Address: HC 3 BOX 242
City-St-Zip: OLD TOWN, FL 32680

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: JEFF CORBIN

VP

04/21/2009

Electronic Signature of Signing Officer or Director

Date