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Mar 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N16390 (9)

1. Corporation Name
POND CREEK HUNTING CLUB, INC.

Principal Place of Business C/O WASTLE SPEARS ROUTE 2 BOX 403 MILTON FL	Mailing Address C/O WASTLE SPEARS ROUTE 2 BOX 403 MILTON FL
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3. Date Incorporated or Qualified
08/18/1986

4. FEI Number
59-2878070

Applied For	
Not Applicable	

2. Principal Place of Business 21 C/o Wastle Spears Suite, Apt. #, etc. 22 8208 Tidwell RD City & State 23 Pace, FL Zip 24 32571	2a. Mailing Address 26 C/o Wastle Spears Suite, Apt. #, etc. 27 8208 Tidwell RD City & State 28 Pace, FL Zip 29 32571 Country 30 USA
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

**SPEARS, WASTLE
 ROUTE 2 BOX 403
 MILTON FL 32571**

10. Name and Address of New Registered Agent

81 Name	Wastle Spears
82 Street Address (P.O. Box Number is Not Acceptable)	8208 Tidwell RD
83	
84 City	Pace
85 Zip Code	FL 32571

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Wastle Spears (NOTE: Registered Agent signature required when reinstating) DATE **03-10-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPEARS, WASTLE	1.2 NAME	Spears, Wastle
STREET ADDRESS	ROUTE 2 BOX 403	1.3 STREET ADDRESS	8208 Tidwell RD
CITY-ST-ZIP	MILTON FL	1.4 CITY-ST-ZIP	Pace FL 32571
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINKARD, JACK	2.2 NAME	Stover, Larry
STREET ADDRESS	1675 PENTON RD	2.3 STREET ADDRESS	433 Ronda ST
CITY-ST-ZIP	MILTON FL	2.4 CITY-ST-ZIP	Pensacola, FL 32534
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STOVER, LARRY	3.2 NAME	Cook, Scottie
STREET ADDRESS	433 RONDA ST	3.3 STREET ADDRESS	9200 Roy Cook RD
CITY-ST-ZIP	PENSACOLA FL	3.4 CITY-ST-ZIP	Milton, FL 32571
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SALTER, DICK	4.2 NAME	Turk, Ed
STREET ADDRESS	RT 2, BOX 397	4.3 STREET ADDRESS	282 McLaughlin RD
CITY-ST-ZIP	MILTON FL	4.4 CITY-ST-ZIP	Milton, FL 32570
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHUCK SMITH	5.2 NAME	
STREET ADDRESS	130 HANCOCK LN	5.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL	5.4 CITY-ST-ZIP	
TITLE	STD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, ALAN	6.2 NAME	
STREET ADDRESS	3285 HWY 182	6.3 STREET ADDRESS	
CITY-ST-ZIP	JAY FL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alan M. Miller **Alan M. Miller** 3-10-98 (950) 994-1422

CR2E037 (10/97)