

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000001582 (4)

1. Corporation Name

THREE RIVERS HUNTING CLUB, INC.



Principal Place of Business Mailing Address
%PERRY CARLTON
RT 5, BOX 614-2
PERRY FL 32347

3. Date Incorporated or Qualified **04/05/1995** 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number **59-3329277** Applied For Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARLTON, PERRY A
RT 5, BOX 614-2
PERRY FL 32347

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BRANNEN, YANCIE	
STREET ADDRESS	RT 3, BOX 402	
CITY-ST-ZIP	PERRY FL 32347	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CARLTON, PERRY A	
STREET ADDRESS	RT 5, BOX 614-2	
CITY-ST-ZIP	PERRY FL 32347	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	HAMMOCK, KIM	
STREET ADDRESS	127 PINE TREE ROAD	
CITY-ST-ZIP	PERRY FL 32347	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SMITH, JIMMY	
STREET ADDRESS	PO BOX 521 N/A	
CITY-ST-ZIP	PERRY FL 32347	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STEPHENS, LAMAR	
STREET ADDRESS	PO BOX 181 N/A	
CITY-ST-ZIP	PERRY FL 32347	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ANDREWS, HUBERT	
STREET ADDRESS	RT 5, BOX 608	
CITY-ST-ZIP	PERRY FL 32347	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ST
3.3 STREET ADDRESS	Murphy, Kim
3.4 CITY-ST-ZIP	129 Pine Tree Rd. Perry, FL 32347
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Perry A. Carlton* **PERRY A. CARLTON** VP. **2/12/96** **904-584-5860**
Date Daytime Phone #

CR2E037 (12/95)