

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001582

FILED
Jan 21, 2009
Secretary of State

Entity Name: THREE RIVERS HUNTING CLUB, INC.

Current Principal Place of Business:

TREE RIVERS HUNTING CLUB
P.O. BOX 1340
PERRY, FL 32348 US

New Principal Place of Business:

TREE RIVERS HUNTING CLUB
2140 WOODS CREEK ROAD
PERRY, FL 32347 US

Current Mailing Address:

P.O. BOX 1340
PERRY, FL 32348 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUNDY, NANCY K
2140 WOODS CREEK ROAD
PERRY, FL 32347 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: VPD () Delete
Name: LUNDY, JAMES R
Address: 2140 WOODS CREEK ROAD
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: WELCH, FLYNN
Address: 313 GLENRIDGE RD
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: ENGLISH, WAYNE
Address: 1399 MACK SESSIONS ROAD
City-St-Zip: PERRY, FL 32348

Title: PD () Delete
Name: BETHEA, BYRAN
Address: 5580 PADGETT ROAD
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: MURPHY, PETE
Address: 132 PINETREE ROAD
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: WALKER, J.R.
Address: RT 1, BOX 242
City-St-Zip: LAMONT, FL 32336

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: D (X) Change () Addition
Name: WALKER, J.R.
Address: 23485 US 98 WEST
City-St-Zip: LAMONT, FL 32336

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: JAMES R. LUNDY

VPD

01/21/2009

Electronic Signature of Signing Officer or Director

_____ Date