## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham\*

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

N97000003964 (0)

CLAY HILL HUNTING CLUB II, INC.

JACKSONVILLE FL 32234

ALEXANDER, LEON

1535 FLOYD JOHNS RD.

JACKSONVILLE FL 32234

Principal Place of Business Mailing Address 5780 COUNTY RD. 218 5780 COUNTY RD. 218 3. Date Incorporated or Qualified JACKSONVILLE FL 32234 JACKSONVILLE FL 32234 07/10/1997 4. FEI Number Applied For <del>59-3461693</del> Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt #, etc Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? No. Yes 28 23 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No Zip Country Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PERSONS, ROBERT B JR. 82 Street Address (P.O. Box Number is Not Acceptable) 2215 S. 3RD ST., STE. 101 83 JACKSONVILLE BEACH FL 32250 City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition Hobbs, Richard 4143 Old Canter Rd. CARTER, JAMES NAME 1.2 NAME 5780 COUNTY RD. 218 STREET ADDRESS 1.3 STREET ADDRESS Jacksonville FL 32234 JACKSONVILLE FL 32234 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE Addition TITLE 2.1 TITLE Lucas, TR JACK 5831 Rock hammed Ct. HARVEY, ARNOLD NAME 2.2 NAME 1568 LOUIE CARTER RD. STREET ADDRESS 2.3 STREET ADDRESS

DELETE Change ■ Addition TITLE 3 1 TITLE REEVES. HERMAN E NAME 3.2 NAME 8583 LAKE MARIETTA DR. S. STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL 32220 3.4. CITY-ST-ZIP CHTY-ST-ZIP DELETE Change Addition TITLE 41 TITLE WALLACE, DAVID NAME 4.2 NAME 1108 RICHARD LANG RD. STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL 32234 CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ AddItion DELETE Change TITLE 5.1 TETLE TINSLEY, JEFF NAME 18476 WARE AVE. STREET ADDRESS 5.3 STREET ADDRESS JACKSONVILLE FL 32234 5.4 CITY-ST-ZIP CITY-ST-ZIP **DELETE** 6.1 TITLE Change Addition TITLE

2.4 CITY-ST-ZIP

6.4 CITY - ST-ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual 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 13 if Changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

**SIGNATURE:** 

STREET ADDRESS

CITY-ST-ZIP

B-19-98

Jacksonville, FL 32234

904-289-7739

FILED

May 20 1998 8:00am

Secretary of State