


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P92000012508 1. Entity Name WHITE STRAND HUNT CLUB, INC.	
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Principal Place of Business 113 MOODY LANE PALATKA, FL 32177	Mailing Address 113 MOODY LANE PALATKA, FL 32177
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DO NOT WRITE IN THIS SPACE



01172006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3154962	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CROWE, GARTH
113 MOODY LANE
PALATKA, FL 32177

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P GARTH, CROWE, 113 MOODY LANE PALATKA, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP PETTY, MARTY 100 LAUREL VALLEY CT. DAYTONA BEACH, FL 32114
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S ARMSTRONG, GARY P.O. BOX 492 N/A EAST PALADKA, FL 32131
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T CROWE, GARTH 113 MOODY LANE PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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03/03/06 80001-010 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Garth Crowe **GARTH CROWE** 2-23-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

386-325-7649