


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # N05514 1. Entity Name HURRICANE HUNTERS, INC.		
Principal Place of Business 42 CORTES COURT PALM COAST, FL 32137	Mailing Address 42 CORTES COURT PALM COAST, FL 32137	



01092007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2477770	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BOYLAN, RAYMOND L 42 CORTES CT PALM COAST, FL 32137	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$81.25 Due by May 1, 2007	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	D/P BOYLAN, RAYMOND 42 CORTES CT PALM COAST, FL 32137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D DILLINGHAM, JOHN M 482 WEST RIVER RD PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D HENNESSEY, RAYMOND W 1751 FARMWAY DR MIDDLEBURG, FL 32068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D GROFF, PETER 1755 GRANDVIEW RD PRESCOTT, AZ 86305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEDBETTER, WAYNE 1721 RIVER HILLS DR ORANGE PARK, FL 32003
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIVERLY, PAUL 3026 E. KINGSFIELD PENSACOLA, FL 32514

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**DO NOT WRITE
IN THIS SPACE**

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 617, 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: *Raymond L. Boylan* *January 9, 2007* 386-447-9857
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #