

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766733

**FILED**  
**Apr 18, 2017**  
**Secretary of State**  
**CC4481935028**

**Entity Name:** MILL SWAMP STILL HUNTING CLUB, INC.

**Current Principal Place of Business:**

11 NE 244TH STREET  
CROSS CITY, FL 32628

**Current Mailing Address:**

P O BOX 1536  
CROSS CITY, FL 32628 US

**FEI Number: 59-2627042**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LILES JR, JARRETT H  
560 NE 348 AVE  
OLD TOWN, FL 32680 US

*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

**Officer/Director Detail :**

Title P  
Name LILES JR., JARRETT H  
Address 560 NE 348 AVENUE  
City-State-Zip: OLD TOWN FL 32680

Title ST  
Name BARBER, MARTIN CJR  
Address 11 NE 244TH STREET  
City-State-Zip: CROSS CITY FL 32628

Title DIRECTOR  
Name ORTON, T J  
Address 3426 NW 42 TERRACE  
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR  
Name WESTER, KENNY  
Address P O BOX 202  
City-State-Zip: CROSS CITY FL 32628

Title VP  
Name BEGUE, JASON  
Address P O BOX 1828  
City-State-Zip: CROSS CITY FL 32628

Title DIRECTOR  
Name ROLLISON, LUCAS  
Address P O BOX 1857  
City-State-Zip: CROSS CITY FL 32628

Title DIRECTOR  
Name BARBER, MARTIN E  
Address 11 NE 244 ST  
City-State-Zip: CROSS CITY FL 32628

Title DIRECTOR  
Name CRISE, AL  
Address 398 NE 649TH STREET  
City-State-Zip: OLD TOWN FL 32680

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE: MARTIN C BARBER JR**

**ST**

**04/18/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            HILL, ROBERT  
Address        136 SE 271 ST  
City-State-Zip: CROSS CITY FL 32628