## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 766733** 

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

**FILED** Jan 22, 2019

**Secretary of State** 

6961605961CC

Officer/Director Detail :

Title Title ST

LILES JR., JARRETT H Name Name BARBER, MARTIN CJR 11 NE 244TH STREET Address **560 NE 348 AVENUE** Address City-State-Zip: CROSS CITY FL 32628 OLD TOWN FL 32680 City-State-Zip:

VΡ Title Title DIRECTOR

Name BEGUE, JASON Name ORTON, T J Address P O BOX 1828 Address 3426 NW 42 TERRACE

CROSS CITY FL 32628 City-State-Zip: GAINESVILLE FL 32609 City-State-Zip:

Title DIRECTOR **DIRECTOR** Title Name CRISE, AL BARBER, MARTIN E Name

Address 398 NE 649TH STREET 11 NE 244 ST Address

City-State-Zip: OLD TOWN FL 32680 City-State-Zip: CROSS CITY FL 32628

Title DIRECTOR Title DIRECTOR HINES, CURTIS Name HILL, ROBERT Name 47 NE 176TH AVE Address Address 136 SE 271 ST

City-State-Zip: CROSS CITY FL 32628 CROSS CITY FL 32628 City-State-Zip:

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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

01/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name SWILLY, MARTY

Address 25 NE 218 AVE

City-State-Zip: CROSS CITY FL 32628