

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001582

**FILED**  
**Jan 20, 2020**  
**Secretary of State**  
**4932004877CC**

**Entity Name:** THREE RIVERS HUNTING CLUB, INC.

**Current Principal Place of Business:**

THREE RIVERS HUNTING CLUB  
2140 WOODS CREEK ROAD  
PERRY, FL 32347

**Current Mailing Address:**

P.O. BOX 1340  
PERRY, FL 32348 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

LUNDY, NANCY K  
2140 WOODS CREEK ROAD  
PERRY, FL 32347 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            PRESIDENT  
Name            LUNDY, JAMES R  
Address        2140 WOODS CREEK ROAD  
City-State-Zip: PERRY FL 32347

Title            VP  
Name            ENGLISH, WAYNE  
Address        1399 MACK SESSIONS ROAD  
City-State-Zip: PERRY FL 32347

Title            DIRECTOR  
Name            MURPHY, PETE  
Address        132 PINETREE ROAD  
City-State-Zip: PERRY FL 32348

Title            DIRECTOR  
Name            GRAY, LIN  
Address        259 SPRINGHILL ROAD  
City-State-Zip: PERRY FL 32347

Title            DIRECTOR  
Name            LEVINGSTON, WILLIAM L  
Address        6015 WOODS CREEK ROAD  
City-State-Zip: PERRY FL 32347

Title            DIRECTOR  
Name            STEPHENS, SHANNON  
Address        2079 STANLEY LANE  
City-State-Zip: PERRY FL 32347

Title            SECRETARY  
Name            LUNDY, NANCY K  
Address        2140 WOODS CREEK ROAD  
City-State-Zip: PERRY FL 32347

*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: JAMES R. LUNDY**

**PRESIDENT**

**01/20/2020**

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

\_\_\_\_\_  
Date