2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718790

FILED Apr 11, 2008 Secretary of State

Entity Name: FLORIDA BOWHUNTERS COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

5935 STATE ROAD 11 6200 CALVIN LEE ROAD DE LEON SPRINGS, FL 32130 US

GROVELAND, FL 34736 US

Current Mailing Address: New Mailing Address:

5935 STATE ROAD 11 6200 CALVIN LEE ROAD DE LEON SPRINGS, FL 32130 US GROVELAND, FL 34736 US

FEI Number: 59-2999698 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DUBOSE III, ROBERT F TD MULLANY, TOM TD 6200 CALVIN LEE ROAD 5935 STATE ROAD 11

US DELEON SPRINGS,, FL 32130 US GROVELAND, FL 34736

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: TOM MULLANY 04/11/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition HOGA BOOM, STEVE WILSON, BILL Name: Name:

5311 PINEVIEW WAY Address: 3618 W. SOUTHERN ST. Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: LECANTO, FL 34460

Title: TD () Delete Title: (X) Change () Addition DU BOSE, BOB Name: MULLANY, TOM Name:

Address: 5935 STATE ROAD 11 Address: 6200 CALVIN LEE ROAD City-St-Zip: DE LEON SPRINGS, FL 32130 City-St-Zip: GROVELAND, FL 34736

Title: () Delete Title: (X) Change () Addition

NICHOLS, LEA TAYLOR, RICHARD W Name: Name:

2625 W. AXEIWOOD DRIVE Address: Address: 424 HAZEL ST City-St-Zip: BEVERLY HILLS, FL 34465 City-St-Zip: LAKE HELEN, FL 32744

Title: PD () Delete Title: PD (X) Change () Addition

HOGA BOOM, STEVE BURKHART, RICHARD Name: Name: 5311 PINEVIEW WAY Address: P.O. BOX 12 Address: City-St-Zip: OLD TOWN, FL 32680 City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD W. TAYLOR SD 04/11/2008