


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 08:00 AM
Secretary of State

DOCUMENT # 724380 1. Entity Name ROY ROAD HUNTING CLUB, INC.	
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Principal Place of Business 222 NORTH THIRD ST PALATKA, FL 32177	Mailing Address 222 NORTH THIRD ST PALATKA, FL 32177
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DO NOT WRITE IN THIS SPACE



01212005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2964332	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 HOLMES, DONALD E 222 NORTH THIRD ST. PALATKA, FL 32177	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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2005	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	PD WOODARD, RICHARD 413 ST JOHNS AVE PALATKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KNOX, JOHN RT 1 BOX 137-A SAN MATEO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DE ROSSETT, RONNIE 413 ST JOHNS AVE PALATKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WALLS, J. ROBERT II 255 DAVIS LAKE RD PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MULLINS, JAMIE 413 ST. JOHNS AVE. PALATKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ORR, MICHAEL 127 RIO VISTA AVE EAST PALATKA, FL 32131

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03/16/05-80064-017 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	3/14/05 <small>Date</small>	<small>Daytime Phone #</small>
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