

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731508

FILED
Mar 06, 2009
Secretary of State

Entity Name: DINNER ISLAND HUNTING LODGE, INC.

Current Principal Place of Business:

P.O. BOX 1331
E. PALATKA, FL 32131

New Principal Place of Business:

BOX 1331
E. PALATKA, FL 32131

Current Mailing Address:

P.O. BOX 1331
E. PALATKA, FL 32131

New Mailing Address:

FEI Number: 59-1456989 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PLANT, CARL
305 MOONSTONE DR
E. PALATKA, FL 32131 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: H CARL PLANT,
Address: 305 MOONSTONE DR
City-St-Zip: E PALATKA, FL 32131

Title: PD () Delete
Name: REVELS, MICHAEL
Address: 724 BOX 142 B
City-St-Zip: SAN MATEO, FL 32187

Title: D () Delete
Name: MATHIS, MIKE
Address: 5100 STOLE RT 206
City-St-Zip: ELKTON, FL 32033

Title: D () Delete
Name: BARNES, DALE
Address: 7470 COWDEN BRANCH RD
City-St-Zip: ELKTON, FL 32033

Title: VD () Delete
Name: MATHIS, JOHN
Address: BOX 743
City-St-Zip: HASTINGS, FL 32145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARL PLANT

SECT

03/06/2009

Electronic Signature of Signing Officer or Director

Date