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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| DOCU!  | MENT # 74726  | 67 (3)  | )  |  |  |   |  |                         |   |
|--|---|---|--|--|--|---|--|-------------------------|---|
| STILL  | HUNTERS OF AMERICA,   | INC:  |  |  |  |   |  |                         |   |
| OTILL  | HORIEHO OF AMEHIOA,   | 1140.   |  |  |  | A CORAN HADAN ANAN AFARA MANA AMAN  | inde andel alak be   |                         |   |
| Principal Place  | of Business   | Martin - Add 1  |  |  |  |   |  |                         |   |
| еппсіраї масе  | or Business   | Mailing Address   |  |  |  | e sament ender Milita ballen tedell Affit)  | 1 1001 01511 010H 011  | ,,,                     | 41811 <b>4</b> 1811 1881  |
| 116 E BALDWIN RD 116 E BALDWIN RD PANAMA CITY FL 32405 PANAMA CITY FL 32405  |   |   |  |  |  |   |  |                         |   |
| COMOMO VII   | 77 FC 32900   | PANAMA CITY FL  | 32400  |  |  |   |  |                         |   |
|  |   |   |  |  |  | <ol> <li>Date Incorporated or Qualified<br/>05/21/1979</li> </ol>                 | 3a. Date of  | 'Last I<br><b>'06/1</b> |   |
| 2. Principal Pla   | ace of Business   | 2a. Mailing Address   |  |  |  | 4. FEI Number   | 1 00/  | <del>, ,</del> ,        | oplied For  |
| 1  |   | 26  |  |  |  | NOT APPLICABLE  |  |                         | lot Applicable  |
| Suite, Apt. i  | #, etc.   | Suite, Apt. #, etc  | Э.   |  |  | 5. Certificate of Status Desired  | □ \$   |                         | Additional  |
| City & State   | 9   | City & State  |  |  | $\longrightarrow$                                  |   |  |                         | Required  |
| 3  | -   | 28  |  |  |  | Election Campaign Financing     Trust Fund Contribution                           |  |                         | May Be<br>I to Fees   |
| Zip  | Country   | Zıp   | Co   | ountry   |  | 8. This corporation has liability for in  |  |                         | · · · · · · · · · · · · · · · · · · ·                               |
| 1]   | 25  | 29  | 30   | ,  |  | Florida Statutes  | Yes 🔀 No   |                         | ,   |
|  | 9. Name and Address of Curr   | ent Hegistered Agent  |  | 81 Name  |  | 10. Name and Address of New Re  | gistered Ager  | nt                      |   |
| SEYMOUR, GARY  |   |   |  |  | ·  |   |  |                         |   |
|  | on, gart<br>Baldwin RD  |   |  | 82 Stree   | Street Address (P.O. Box Number is Not Acceptable) |   |  |                         |   |
|  | A CITY FL 32405   |   |  | 83   |  |   |  |                         |   |
|  |   |   |  |  |  |   |  |                         |   |
|  |   |   |  | 94 034   |  |   |  |                         |   |
| I1. Pursuant to<br>or registero<br>familiar wit  | to the provisions of Sections 617.05<br>red agent, or both, in the State of Flo<br>th, and accept the obligations of, Se  | 02 and 617.1508, Florida S'<br>orida. Such change was auth<br>oction 617.0503, Florida Sta        | tatutes, the ab  | 84 City<br>cove-named<br>corporation   | corporations board of                              | on submits this statement for the purp<br>of directors. I hereby accept the appoi | FL 85 pose of changing   | 1                       |   |
| GNATURE  | in, and accept the obligations of, se   | ction of 7.0505, Florida Sta  | iores.   | ove-named<br>corporation   |  |   | oose of changing<br>intment as regis   | 1                       |   |
| SIGNATURE  | Signature, typed or printed name of registered agr  | ction of 7.0505, Florida Sta  | tatutes, the ab<br>norized by the<br>tutes.  (NOTE: Registers  | pove-named<br>corporation<br>ad Agent agnatur  |  | en reinstating)   | pose of changing<br>intment as regis   | g its retered           | gistered office<br>agent. I am                                      |
| SIGNATURE  | Signature, typed or printed name of registered agr OFFICERS A   | ent and title if applicable.  | (NOTE: Registere   | pove-named<br>corporation<br>ad Agent agnatur  | required wh  | en renstatingi<br>ADDITIONS/CHANGES TO OFFIC                                      | cose of changing introduced as regis   | g its restered          | gistered office<br>agent. I am                                      |
| SIGNATURE  | Signature, typed or printed name of registered agr OFFICERS A PD SEYMOUR, LUTHER  | ert and Hie if applicable.  ND DIRECTORS  | (NOTE: Registers 13 1.11 12)   | sove-named corporation ad Agent signature.  TITLE  | PD Dr  | additions/changes to office  Jason G. Seymo                                       | DATE  CERS AND DIR  Chur D.M   | g its restered          | gistered office<br>agent. I am                                      |
| SIGNATURE  2.  ITLE  AME  TREET ADDRESS  | Signature, typed or printed name of registered agr OFFICERS A PD SEYMOUR, LUTHER 933 W. CAROLINE BLVD.  | ert and Hie if applicable.  ND DIRECTORS  | (NOTE: Registers 13 1.11 1.21 1.3 \$   | pove-named corporation and Agent signature.  TiTLE  NAME  STREET ADDRESS   | PD Dr  | en reinstatingi ADDITIONS/CHANGES TO OFFIC Jason G. Seymo E. Baldwin Rd.          | DATE  CERS AND DIR  Chur D.M   | g its restered          | gistered office<br>agent. I am                                      |
| IZ.  ITLE  IAME  ITREET ADDRESS  ITY-ST-ZIP  | Signature, typed or printed name of registered agr OFFICERS A PD SEYMOUR, LUTHER 933 W. CAROLINE BLVD. PANAMA CITY FL   | ent and title if applicable.  ND DIRECTORS  DELETE  | (NOTE: Registers 13 1.11 1.21 1.35 1.41  | ove-named corporation ad Agent signature.  TiTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  | PD Dr  | additions/changes to office  Jason G. Seymo                                       | DATE CERS AND DIR CHAPTER CATE COMMAND | e its retered           | gistered office<br>agent. I am<br>RS IN 12                          |
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appears in Block 12 or Block 15 if

SIGNATURE:

Gary Seymour STD

2/19/96