

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751106

FILED  
May 01, 2010  
Secretary of State

**Entity Name:** DIXIE HUNTING CLUB, INC.

**Current Principal Place of Business:**

BARBER AVENUE  
P. O. BOX 1866  
CROSS CITY, FL 32628

**New Principal Place of Business:**

**Current Mailing Address:**

BARBER AVENUE  
P.O. BOX 1866, N/A  
CROSS CITY, FL 32628 US

**New Mailing Address:**

**FEI Number:** 59-2110209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

KIGHT, MARY O  
1032 NE 444TH ST  
OLD TOWN, FL 32680 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

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: BOYD, LARRY  
Address: 266 SE 634TH STREET  
City-St-Zip: OLD TOWN, FL 32680

Title: TD  
Name: MARKHAM, HOUSTON  
Address: 7859 NE HWY 351  
City-St-Zip: OLD TOWN, FL 32680

Title: D  
Name: CREMER, JOHN  
Address: 3520 NE 353 HWY  
City-St-Zip: OLD TOWN, FL 32680

Title: D  
Name: BARRY, TONY  
Address: 1904 SE 349 HWY  
City-St-Zip: OLD TOWN, FL 32680

Title: PD  
Name: BARBER, JUSTIN  
Address: 393 NE 512TH AVE  
City-St-Zip: OLD TOWN, FL 32680

Title: SD  
Name: WIMBERLY, KENNETH  
Address: 801 NE 878TH AVENUE  
City-St-Zip: OLD TOWN, FL 32680

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: JUSTIN BARBER

PD

05/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date