FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

APPROVED

DOCUMENT # **753243** (5)

HERNANDO SPORTSMAN'S CLUB, INC.

FILED
FLORIDA

Principal Place of Business	Mailing Address
17045 COMMERCIAL HWY BROOKSVILLE FL 34614 US	~~P O BOX 10754~~ P O BOX 10754 BROOKSVILLE FL 34601-754 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/02/1980	3a. Date of Last Report: 04/20/1994
4. FEI Number: 59-2102875	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 PO Box 10754
City & State 23	City & State 28 BROOKSVILLE, FL
Zip 24 / Country 25	Zip 29 34601-0754 / Country 30 U.S.A.

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RICKERT, RANDIE W 7461 CEDARHURST STREET BROOKSVILLE FL 34613	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Typed or Printed Name of Registered Agent and Title, if Applicable) (Registered Agent's Signature required for Change) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS, ETC.	
TITLE	PD	11 TITLE	☐ Change ☒ Addition
NAME	RICKERT, RANDIE W.	12 NAME	
STREET ADDRESS	7461 CEDARHURST	13 STREET ADDRESS	
CITY ST ZIP	BROOKSVILLE FL	14 CITY ST ZIP	BROOKSVILLE, FL. 34613
TITLE	VD	21 TITLE	☐ Change ☒ Addition
NAME	THOMPSON, BILL	22 NAME	
STREET ADDRESS	5532 S ASHLEY TERRACE	23 STREET ADDRESS	
CITY ST ZIP	INVERNESS FL	24 CITY ST ZIP	INVERNESS, FL. 34452
TITLE	SD	31 TITLE	☒ Change ☐ Addition
NAME	~~MYERS, JANCIE~~	32 NAME	SD SANTISE, ROSE
STREET ADDRESS	~~3044 N HIAWATHA TERRACE~~	33 STREET ADDRESS	6189 HELM AVE.
CITY ST ZIP	~~CRYSTAL RIVER FL~~	34 CITY ST ZIP	SPRING HILL, FL. 34608
TITLE	TD	41 TITLE	☐ Change ☒ Addition
NAME	WILSON, KAY	42 NAME	
STREET ADDRESS	16612 CROSSANDRA LANE	43 STREET ADDRESS	
CITY ST ZIP	SPRING HILL FL	44 CITY ST ZIP	SPRING HILL, FL. 34610
TITLE	ED	51 TITLE	☒ Change ☐ Addition
NAME	~~WIGGEL, ED~~	52 NAME	ED GEORGE HEAD
STREET ADDRESS	~~6140 DELTONA BLVD~~	53 STREET ADDRESS	14700 GWENWOOD CIRCLE
CITY ST ZIP	~~SPRING HILL FL~~	54 CITY ST ZIP	HUDSON, FL. 34667
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Kay Wilson Treasurer 4/24/95 (813)856-3583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

0085465