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Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **753848** (1)

1. Corporation Name

MCKINNONVILLE HUNTING CLUB, INC.

Principal Place of Business

**103 MAGNOLIA AVE.
CANTONMENT FL 32533**

Mailing Address

**4420 IVORY LANE
MOLINO FL 32577
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

28 Country

8. Name and Address of Current Registered Agent

**WALTON, GARRETT W.
103 MAGNOLIA AVE.
7TH FLOOR
CANTONMENT FL 32533**

3. Date Incorporated or Qualified

08/20/1980

4. FEI Number

63-0879561

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when relating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **MAJORS, JR. L B.**
STREET ADDRESS **5586 ESPERANTO DR.**
CITY-ST-ZIP **PENSACOLA FL**

TITLE **STD** ☐ DELETE

NAME **SPIVEY, KEN**
STREET ADDRESS **4420 IVORY LN**
CITY-ST-ZIP **MOLINO FL**

TITLE **D** ☒ DELETE

NAME **GARRETT, SAMBO**
STREET ADDRESS **8101 HIGHWAY 99 SOUTH**
CITY-ST-ZIP **ATMORE, AL 00000**

TITLE **D** ☒ DELETE

NAME **LEWIS, EUGENE**
STREET ADDRESS **7821 HIGHWAY 99 SOUTH**
CITY-ST-ZIP **WALNUT HILL FL**

TITLE **V** ☒ DELETE

NAME **WEAVER, JAMES**
STREET ADDRESS **5888 PILGRIM TRAIL WEST**
CITY-ST-ZIP **CANTONMENT FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**Spivey, Ken
4420 Ivory Lane
Molino, FL 32577**

**Blackmon, Lloyd
6208 East shore Dr.
Pensacola, FL 32505**

**EMMONS, Larry
1340 Dog Track Rd.
Pensacola, FL 32507**

**Miller, Jimmy
3812 Crabtree Church Rd.
Molino, FL 32577**

**Hinote, Tom
7315 Shelby Lane
Pensacola, FL 32526**

14. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ken Spivey

4-9-98 850 4385311

CR2E037 (10/97)