

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754870

1. Entity Name

BARRINEAU PARK HUNTING CLUB, INC.

Principal Place of Business

5632 CHALKER RD.
C/O ERNEST SETTLE
MOLINO FL 32577

Mailing Address

5632 CHALKER RD.
C/O ERNEST SETTLE
MOLINO FL 32577

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3016144

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SETTLE, ERNEST
5632 CHALKER RD.
MOLINO FL 32577

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME SETTLE, ERNEST J. ☐ Delete
STREET ADDRESS 5632 CHALKER RD.
CITY-ST-ZIP MOLINO FL 32577

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME KITTRELL, JOE ☐ Delete
STREET ADDRESS 400 KITTRELL STREET
CITY-ST-ZIP CANTONMENT FL 32533

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SIGHTER, DEWITT ☐ Delete
STREET ADDRESS JOHN WILSON RD
CITY-ST-ZIP CANTONMENT FL 32533

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME POPPELL, DANIEL ☐ Delete
STREET ADDRESS 1450 GOLDENROD RD
CITY-ST-ZIP CANTONMENT FL 32533

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME NELSON, JAMES ☐ Delete
STREET ADDRESS 733 NEAL RD
CITY-ST-ZIP CANTONMENT FL 32533

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME SHEFFIELD, HARRY ☐ Delete
STREET ADDRESS GIBSON RD.
CITY-ST-ZIP MOLINO FL 32577

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ernest Settle

3-14-03

850-587-2261

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)



DO NOT WRITE IN THIS SPACE