

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90082 026 ****61.25

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
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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.	<input type="checkbox"/> Delete
STREET ADDRESS 5632 CHALKER RD.	CITY-ST-ZIP MOLINO FL 32577	
TITLE VP	NAME KITTRELL, JOE	<input type="checkbox"/> Delete
STREET ADDRESS 400 KITTRELL STREET	CITY-ST-ZIP CANTONMENT FL 32533	
TITLE D	NAME SIGHTER, DEWITT	<input type="checkbox"/> Delete
STREET ADDRESS JOHN WILSON RD	CITY-ST-ZIP CANTONMENT FL 32533	
TITLE D	NAME POPPELL, DANIEL	<input type="checkbox"/> Delete
STREET ADDRESS 1450 GOLDENROD RD	CITY-ST-ZIP CANTONMENT FL 32533	
TITLE D	NAME NELSON, JAMES	<input type="checkbox"/> Delete
STREET ADDRESS 733 NEAL RD	CITY-ST-ZIP CANTONMENT FL 32533	
TITLE SD	NAME SHEFFIELD, HARRY	<input type="checkbox"/> Delete
STREET ADDRESS GIBSON RD.	CITY-ST-ZIP MOLINO FL 32577	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Date: 3-14-03 Daytime Phone #: 850-587-2200

CR2E037 (9/01)