

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90366 024 *****61.25

0018124

DOCUMENT # 755176

1. Entity Name

PINE BARRON CREEK HUNTING CLUB, INC.

Principal Place of Business

7530 MORTON RD.
 CENTURY FL 32535

Mailing Address

7530 MORTON RD.
 CENTURY FL 32535

2. Principal Place of Business

7530 Morton Rd
 Suite, Apt. #, etc.

3. Mailing Address

7530 Morton Rd
 Suite, Apt. #, etc.

City & State

Century F

City & State

Century FI

Zip

32535

Country

ESCAMBIA

Zip

32535

Country

ESCAMBIA

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEEBLES, HENRY W.
 1551 N PINE BARRON RD
 MCDAVID FL 32568

7. Name and Address of New Registered Agent

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

Henry W. Peebles

Henry W. Peebles (President)

4-10-01

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	PEEBLES, WILLIE	
STREET ADDRESS	1551 N PINE BARREN RD	
CITY-ST-ZIP	MCDAVID FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MILSTEAD, VINCENT	
STREET ADDRESS	3000 LAMBERT BRIDGE RD.	
CITY-ST-ZIP	MC DAVID FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	STEWART, ROBERT	
STREET ADDRESS	7530 MORTON RD.	
CITY-ST-ZIP	CENTURY FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HUDSON, A. J	
STREET ADDRESS	3910 HWY 164	
CITY-ST-ZIP	MCDAVID FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	AGERTON, EDWARD	
STREET ADDRESS	3671 MELVIN ROAD	
CITY-ST-ZIP	MCDAVID FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HALL, JAMES E	
STREET ADDRESS	5081 HWY 164	
CITY-ST-ZIP	MCDAVID FL 32568	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CLARK Childers	
STREET ADDRESS	PO Box 207 Gonzalez #1	
CITY-ST-ZIP	32560	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gary Kelly	
STREET ADDRESS	702 Canondelay Dr.	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Agerton	
STREET ADDRESS	3681 Melvin Rd	
CITY-ST-ZIP	MC David FL 32568	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Keith Peebles	
STREET ADDRESS	1531 N Pine Barren Rd.	
CITY-ST-ZIP	MC David FL 32568 Deleted	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Henry W. Peebles

President

4-10-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)