

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760091 (9)
1. Corporation Name
DEEP CREEK HUNTING CLUB OF BRYCEVILLE, INC.

Principal Place of Business

Mailing Address

RT. 1 BOX 589
BRYCEVILLE FL 32009

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BRYCEVILLE FL 32009

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/18/1981		3a. Date of Last Report 02/07/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RYAN, DAVID 268 W DREW ST. BALDWIN FL 32234				81 Name J Charles Wilson 82 Street Address (P.O. Box Number is Not Acceptable) 4417 BEACH BLVD SUITE 200 83 84 City JACKSONVILLE FL 85 Zip Code 32207			
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 <i>J Charles Wilson</i> J CHARLES WILSON 7/27/97 (NOTE: Registered Agent signature required when reinstating)							
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE PD NAME RYAN, DAVID STREET ADDRESS 268 W. DREW ST. CITY-ST-ZIP BALDWIN FL				1.1 TITLE (P) GIDDENS, Darrell 1.2 NAME 1.3 STREET ADDRESS RT 1, Box 589 1.4 CITY-ST-ZIP Bryceville, FL 32009			
TITLE VD NAME HODGES, EUGENE STREET ADDRESS 12017 W BEAVER ST. CITY-ST-ZIP JACKSONVILLE FL				2.1 TITLE (VD) 2.2 NAME RYAN, DAVID 2.3 STREET ADDRESS 268 W DREW ST. 2.4 CITY-ST-ZIP			
TITLE D NAME GIDDENS, DARRELL STREET ADDRESS RT. 1 BOX 589 CITY-ST-ZIP BRYCEVILLE FL				3.1 TITLE TD 3.2 NAME Thornton, WAYNE 3.3 STREET ADDRESS 2937 TINSLEY RD 3.4 CITY-ST-ZIP JACKSONVILLE FL			
TITLE TD NAME THORNTON, WAYNE STREET ADDRESS 2937 TINSLEY ROAD CITY-ST-ZIP JACKSONVILLE FL				4.1 TITLE (S D) 4.2 NAME J CHARLES WILSON 4.3 STREET ADDRESS 4417 BEACH BLVD, SUITE 200 4.4 CITY-ST-ZIP JACKSONVILLE, FL 32207			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			

14. I do 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.

CR2E037 (9/96)