2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 07, 2006 8:00 am Secretary of State **DOCUMENT # 760091** 1. Entity Name 04-07-2006 90034 014 ****61.25 DEEP CREEK HUNTING CLUB OF BRYCEVILLE, INC. Principal Place of Business Mailing Address 265 W OLIVER 265 W OLIVER **BALDWIN FL 32234 BALDWIN FL 32234** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Nuss baum RYAN, DAVID 265 W OLIVER STREET JACKSONVILLE FL 32234 Zip Code 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. I am familiar with, and accept the obligations of registered agent INOTE Registered Agent signature required w Signature: typical or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD PRES. ☐ Delete TITLE Tifle Change Addition Henry Nuss baum RYAN, DAVID NAME NAME 2612 W. Kingstree Dr. STREET ADDRESS 265 W OLIVER STREET STREET ADDRESS JACKSONVILLE FL 32234 JAX. 41. 32211 CITY-ST-7IP TD TITLE ☐ Delete TITLE V. Presi Change Addition THORTON, WAYNE Richard Hamilton NAME 662 CAMP Milton LN. 2937 TINSLEY ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP CITY-ST-7IP JAX. 71. VPD ☐ Delete TITLE TITLE Change ☐ Addition Keuin Pitts NAME CARTER, BOBBY NAME 697 CAMP MILTON LN. STREET ADORESS RT 2 BOX 24A MOTES RD STREET ADDRESS CITY-ST-ZIP **BRYCEVILLE FL 32009** CITY-ST-ZIP 71. ケルメ、 BOB Smith ☐ Delete TITLE Change Addition NAME THORNTON, HAROLD D NAME 13475 OLD PLANK RO. STREET ADORESS 509 PURCELLDRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32221 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Oelele TIT1 F ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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.

ENLY NUSSBAUM

SIGNATURE:

FILED

904-655-9018