

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766775

FILED
Apr 06, 2009
Secretary of State

Entity Name: ROCK LEVEL HUNTING CLUB, INC.

Current Principal Place of Business:

P.O. BOX 397
HORSESHOE, FL 32648

New Principal Place of Business:

658 SW 659 AVE
HORSESHOE, FL 32648

Current Mailing Address:

P.O. BOX 397
HORSESHOE, FL 32648

New Mailing Address:

FEI Number: 46-0504483 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HUNT, TOMMIE
RT. 1, BOX 182
HORSESHOE, FL 32648 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUNT, TOMMIE
Address: RT 1 BOX 142, HWY S. 351
City-St-Zip: HORSESHOE, FL 32648

Title: V () Delete
Name: PARTIN, JOHN
Address: P.O. BOX 324 HWY., S 351
City-St-Zip: HORSESHOE, FL 32648

Title: ST () Delete
Name: VALENTINE, STEVE
Address: 658 SW 659 AVE.
City-St-Zip: HORSESHOE, FL 32648

Title: D () Delete
Name: BUTLER, DARBY
Address: RT. 1, BOX 149, HWY. S351
City-St-Zip: HORSESHOE, FL 32648

Title: D () Delete
Name: SHEHEANE, BILLY
Address: P.O. BOX 309, STOCKOCE RD.
City-St-Zip: CROSS CITY, FL 32628

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE VALENTINE

ST

04/06/2009

Electronic Signature of Signing Officer or Director

Date