

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 768275

FILED  
Nov 03, 2008  
Secretary of State

**Entity Name:** THE HIGHLANDS GUN CLUB, INC.

**Current Principal Place of Business:**

313 COWHOUSE RD  
LORIDA, FL 338579622 US

**New Principal Place of Business:**

**Current Mailing Address:**

313 COWHOUSE RD  
% GEORGE WILSON, PO BOX 389  
LORIDA, FL 338579622 US

**New Mailing Address:**

313 COWHOUSE RD  
LORIDA, FL 338579622 US

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WILSON, GEORGE M  
313 COWHOUSE RD  
LORIDA, FL 33857 US

**Name and Address of New Registered Agent:**

WILSON, GEORGE M M  
313 COWHOUSE RD  
LORIDA, FL 33857 US

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: GEORGE M WILSON

11/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: TAYLOR, BRUCE  
Address: 36535 57TH AVE.  
City-St-Zip: LAKE WORTH, FL 334632249

Title: P ( ) Delete  
Name: STEGALL, NEIL  
Address: 3127 WASHINGTON RD.  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DT ( ) Delete  
Name: WILSON, GEORGE,  
Address: 313 COWHOUSE ROAD  
City-St-Zip: LORIDA, FL

Title: VPD ( ) Delete  
Name: KOSKO, BOB  
Address: 830 NE 59TH COURT  
City-St-Zip: FT LAUDERDALE, FL

Title: VPD ( ) Delete  
Name: BENNETT, MAK  
Address: 5142 PALO VERDE PL.  
City-St-Zip: WEST PAL BEACH, FL 33415

Title: D ( ) Delete  
Name: JAMES, ROBERT PAUL  
Address: 6904 W CORTEZ RD  
City-St-Zip: BRADENTON, FL

**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:

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: GEORGE M. WILSON

DT

11/03/2008

Electronic Signature of Signing Officer or Director

Date