

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90712 028 *****61.25

DOCUMENT # 770706

1. Entity Name

HIGH POINT HUNT CLUB, INC.



Principal Place of Business

**C/O JOSEPH RUDEEN, JR.
322 CHAPEL ROAD
ST AUGUSTINE FL 32095**

Mailing Address

**C/O JOSEPH RUDEEN, JR.
322 CHAPEL ROAD
ST AUGUSTINE FL 32095**

2. Principal Place of Business

**90 CLEM MALICK
Suite, Apt. #, etc. South
641 SENECA BLVD**

3. Mailing Address

**90 CLEM MALICK
Suite, Apt. #, etc.
641 South SENECA BLVD.**

City & State

Daytona Beach FL

City & State

Daytona Beach FL

Zip

32114

Country

USA

Zip

32114

Country

USA

4. FEI Number **59-2353103**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MANUCY, CURTIS L
5395 PORTER ROAD
SAINT AUGUSTINE FL 32095**

7. Name and Address of New Registered Agent

Name **Dominic Nicklo**

Street Address (P.O. Box Number is Not Acceptable)

288 CHAPEL ROAD

City

ST. AUGUSTINE

FL

Zip Code

32084

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Dominic Nicklo **Dominic Nicklo**

4/28/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	WILLIAM, PINYAN R	
STREET ADDRESS	5620 STATE RD. 207	
CITY-ST-ZIP	ELKTON FL 32033	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	MANUCY, CURTIS L	
STREET ADDRESS	5395 PORTER ROAD	
CITY-ST-ZIP	ST AUGUSTINE FL 32095	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GRAY, KENNY	
STREET ADDRESS	4770 WOLF ROAD	
CITY-ST-ZIP	SAINT AUGUSTINE FL 32092	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PELLICER, FRANK	
STREET ADDRESS	7937 HAMILTON AVENUE	
CITY-ST-ZIP	HASTINGS FL 32145	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SHANNON, HERBERT	
STREET ADDRESS	568 DEERFIELD ROAD	
CITY-ST-ZIP	SAINT AUGUSTINE FL 32095	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	POWELL, JAY	
STREET ADDRESS	1304 VISTA COVE ROAD	
CITY-ST-ZIP	SAINT AUGUSTINE FL 32095	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CLEM MALICK (-P)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	641 SOUTH SENECA BLVD.	
STREET ADDRESS	DAYTONA BEACH, FL 32114	
CITY-ST-ZIP		
TITLE	FREDERICK Nicklo (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3530 CARMEL ROAD	
STREET ADDRESS	ST. AUGUSTINE, FL 32086	
CITY-ST-ZIP		
TITLE	JOE HAYAN (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	336 LINDEN RD, ST AUGUSTINE, FL	
STREET ADDRESS	32086	
CITY-ST-ZIP		
TITLE	Dominic Nicklo (ST)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	288 CHAPEL RD	
STREET ADDRESS	ST AUGUSTINE, FL 32084	
CITY-ST-ZIP		
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:

Dominic Nicklo

Dominic F. Nicklo

4/28/03

9048260047

CR2E037 (10/02)