2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816487

Address:

City-St-Zip:

515 WILDWOOD DRIVE

THOMASVILLE, GA 31792

Entity Name: DUCKHAVEN GUN CLUB, INC.

FILED Apr 01, 2009 Secretary of State

Current P	Principal Place of Business:	New Principal Place	of Business:	
314 GORE THOMAS\	DON AVE VILLE, GA 31792 US			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
C/O BERNARD LANIGAN 314 GORDON AVE THOMASVILLE, GA 31792 US		314 GORDON AVE THOMASVILLE, GA 31792 US		
FEI Number	r: 58-0961019 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
712 N. RIE TALLAHA: The above	N, BRYAN DAVID DE SSEE, FL 32303 US e named entity submits this statement for the e of Florida.	e purpose of changing its registere	d office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
Election Ca	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	DV () Delete MC COLLUM, JIM 105 CHUKKARS DR THOMASVILLE, GA 31792	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete ROBINSON, BRYAN, D 712 N RIDE TALLAHASSEE, FL 32303	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete ANSLEY, DAVID 7069 CARMEL DRIVE TALLAHASSEE, FL 32308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete LANIGAN, BERNARD 314 GORDON AVE THOMASVILLE, GA 31792	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	PD () Delete ORR, DAVID	Title: Name:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: BERNARD LANIGAN T 04/01/2009