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Jan 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F64874** (3)

1. Corporation Name
HAW CREEK HUNT CLUB, INC.

Principal Place of Business

**279 SO CENTRAL AVE
UMATILLA FL 32784
US**

Mailing Address

**PO BOX 949
UMATILLA FL 32784-0949
US**



3. Date Incorporated or Qualified 01/27/1982	3a. Date of Last Report 01/23/1996
4. FEI Number 59-2313612	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☒ No	

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**HASLEY, DOUGLAS E.
43 MEBANE STREET
P. O. BOX 949
UMATILLA FL 32784**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0132 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

(Signature of the corporation or registered agent, if not a corporation, the registered agent)

(If the Registered Agent's signature is not used when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	VAUGHN, C E JR	
STREET ADDRESS	185 E LAKEVIEW DR	
CITY - ST - ZIP	UMATILLA, FL 00000	
TITLE	D	☐ DELETE
NAME	DRURY, WINSTON	
STREET ADDRESS	NORTH HWY 11	
CITY - ST - ZIP	DELEON SPRINGS, FL 00000	
TITLE	D	☐ DELETE
NAME	CAMPBELL, RICK	
STREET ADDRESS	HWY 452	
CITY - ST - ZIP	UMATILLA FL	
TITLE	TD	☐ DELETE
NAME	HASLEY, DOUGLAS E.	
STREET ADDRESS	43 MEBANE STREET	
CITY - ST - ZIP	UMATILLA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information furnished 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 annual report or supplementary annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-97 352669-2146

Date

Filing Fee #

CR2E034 (9/96)