## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## H96519 **DOCUMENT #**

1. Entity Name

F. & C. HUNTING CLUB, INC.



**FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90159 008 \*\*\*150.00

Principal Plac C/O DRAWDY 10201 LANTA LAKE WORTH US	y construct Ina RD.		10201	Mailing Address 10201 LANTANA RD. LAKE WORTH FL 33467 US								
2. Principal Place of Business				3. Mailing Address			1	18 BEIDI BIINI 11016			1011 B1B11 1001 -	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State				City & State			4. FEI Number 59	-2715002		_ <del></del>	oplied For ot Applicable	
Zip Country			Zip		Country		5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	6Name	and Address of Current	Registere	d Agent			7. Name and Addre	ss of New Reg	istered Ag	ent		
DRAWDY, CHARLES D.						Name						
10201 LA	ntana Rd.			Stre	Street Address (P.O. Box Number is Not Accepta					,		
LAKE WORTH FL 33467					07							
					City	<i>(</i>			FL	Zip Code	e	
Afte	ILE NOW!! r May 1, 200	or printed name of registered agent and FEE IS \$150.00 3 Fee will be \$550.00 6 Florida Department of		cable. (NOTE:	Registered Agents	signature required	9. Election C	Campaign Finand Contribution.	DATE cing		<b>0</b> May Be I to Fees	
10.		OFFICERS AND	DIRECTOR	RS	11.		ADDITIONS/CHANG	GES TO OFFICE	ERS AND D	IRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT DRAWDY, 10201 LAN LAKE WO	ntana RD.		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS			ָּן	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DRAWDY,	CHARLES D. Itana Rd.		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS			Γ	Change	☐ Addition	
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TITLE				☐ Delete	TITLE				[	_ Change	☐ Addition	

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 607, 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.

CITY-ST-ZIP

STREET ADDRESS

NAME STREET ADDRESS

CITY-ST-ZIP