

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # L32233

1. Entity Name
LIVE OAK HUNTING CLUB, INC.



FILED
May 03, 2004 08:00 AM
Secretary of State

Principal Place of Business
13038 161ST RD
LIVE OAK, FL 32060

Mailing Address
13038 161ST RD
LIVE OAK, FL 32060



04292004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For	
Not Applicable	

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PUTNAL, BRYAN L.
1800 FLORIDA NATIONAL BANK TOWER
225 WATER STREET
JACKSONVILLE, FL 32202

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, RYAN 19755 162ND ST LIVE OAK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAND, HAL 19755 162ND ST LIVE OAK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, REID 19755 162ND ST LIVE OAK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/03/04-80155-014 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: Hal Land Hal Land 4/27/04 (386) 776-210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #