

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005604

FILED
Jan 16, 2009
Secretary of State

Entity Name: THE BIG BEND HUNT CLUB INC.

Current Principal Place of Business:

C/O JAMES SANDERS
HIGHWAY 20 WEST
HOSFORD, FL 32334

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 142
HOSFORD, FL 32334

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, JAMES
HWY 20 WEST
(1 MILE W. OF HOSFORD)
HOSFORD, FL 32334 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOVE, MICHAEL R
Address: 4361 KIMBERLY CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: S () Delete
Name: SANDERS, JAMES
Address: PO BOX 142
City-St-Zip: HOSFORD, FL 32334

Title: VP () Delete
Name: BRADY, CHIP
Address: 1116 WINFIELD FOREST DR.
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: MICHAEL R. LOVE

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date