

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #
 1. Corporation Name
 N00146 (3)
 BAY LAKE CONSERVATION/HUNT CLUB, INC.

Principal Place of Business
 Grover Criswell
 15001 N.E. 248th Ave.
 Salt Springs, Fla.
 32134

Mailing Address
 same as on left

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 12/2/1983	3a. Date of Last Report
4. FEI Number Not Applicable	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

Grover C. Criswell
 15001 N.E. 248th Ave.
 Salt Springs, Fla.
 32134

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	NAME
D	D. W. "Bill" Vaughn, Pres.
STREET ADDRESS	10654 N.E. 207th Lane
CITY-ST-ZIP	Ft. McCoy, Fla. 32134
TITLE	NAME
A	Jimmy Little, Vice Pres.
STREET ADDRESS	Rt. 3 Box 1852
CITY-ST-ZIP	Palatka, Fla. 32177
TITLE	NAME
A	Grover Criswell, Sect/Treas
STREET ADDRESS	15001 N.E. 248th Ave.
CITY-ST-ZIP	Salt Springs, Fla. 32134
TITLE	NAME
	Horace Jones, Board member
STREET ADDRESS	5331 Lunn Rd.
CITY-ST-ZIP	Lakeland, Fla. 33811
TITLE	NAME
	Hugh Matchett, Board Member
STREET ADDRESS	N.E. 212th Street
CITY-ST-ZIP	Orange Springs, Fla. 32182
TITLE	NAME
	Ray Ryals, Board member
STREET ADDRESS	6314 No. Black Dairy Rd.
CITY-ST-ZIP	Seffner, Fla. 33584

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Grover Criswell May 21, 1997 352/685-2287
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/96)