2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 01, 2007 08:00 AM DOCUMENT # N01000002298 1. Entity Name **Secretary of State** BOGGY CREEK HUNTING CLUB, INC. Mailing Address Principal Place of Business 9312 BELL RIDGE DRIVE 9312 BELL RIDGE DRIVE PENSACOLA FL 32526 PENSACOLA FL 32526 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc Suite, Apl. #, olc. 1st MOORE CR2E037 (10/06) Applied For City & State 4. FEI Number City & State NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo FOWLER, RONALD F Street Address (P.O. Box Number is Not Acceptable) 9312 BELL RIDGE DRIVE PENSACOLA FL 32526 City Zip Codo FL 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 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ■ Addition ☐ Defete IIILE Change | ШЕ NAME. MALE FOWLER, RONALD F STREET ADDRESS U00000616705 02/07/07-80040-011 70.00 STREET ADDRESS 9312 BELL RIDGE DRIVE CITY ST ZIP CITY - ST- 7IP PENSACOLA FL 32526 ☐ Change Addition ☐ Defete TITLE IIIL PD NAM MAME FOWLER, GREGORY A STREET ADDRESS STREET ADDRESS 7120 BEULAH ROAD CITY-ST ZIP CITY-ST-ZIP PENSACOLA FL 32526 Change Addition ☐ Delete HILE TITLE NaMi FÖWLER, LINDA L STREET ADDRESS STREET ADDRESS 9312 BELL RIDGE DRIVE CITY-ST-ZIP CITY - ST- ZIP PENSACOLA FL 32526 ☐ Change ☐ Addition ☐ Delete HHI NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SE 71P ☐ Change Addition HILF ☐ Delete DILE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, 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:

Royald Douler

JAN 26,2007

FILED