2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2008 08:00 Al Secretary of State

UAL KEPUKI				
DOCUMENT # N0100002463 1. Entity Name MIAMI TRACT HUNT CLUB INC.				
Mailing Address				
1721 ROYAL PALM DR. Edgewater, Fl 32132				
	Mailing Address 1721 ROYAL PALM DR.			



DO NOT WRITE IN THIS SPACE

01072008 No Chg-NP CR2E037 (4/06)

4. FEI Number	Applied For
59-3717332	 Not Applicabl
5. Certificate of Status Desired	\$8.75 Additional

6. Name and Address of Current Registered Agent

THOMAS, MICHAEL L 1721 ROYAL PALM DR. EDGEWATER, FL 32132

DO NOT WRITE IN THIS SPACE

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8. The above the obliga	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	d office or r	registered agent, or bo	th, in the State of Florida. I am familiar v	vith, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. {NOTE; Registered	Agent signature	e required when rainstating)	- DATE	· · · · · · · · · · · · · · · · · · ·
1+5	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000778697 01/11/08-80007-016	61.25
10.	OFFICERS AND DIREC	CTORS	<u> </u>	•	I	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, MICHAEL L 1721 ROYAL PALM DR. EDGEWATER, FL 32132					•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MYERS, DAVID 3697 GLENN RD MIMS, FL 32754					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, JOHNNY 1704 EDGEWATER DR EDGEWATER, FL 32132	:		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	;					
NAME STREET ADDRESS CITY-ST-ZIP	enn i de la degle Alle de la degle				· · · · · · · · · · · · · · · · · · ·	· · ·
12. I hereby	certify that the information supplied with this fi	ling does not qualify for the exe	mptions cor	ntained in Chapter 119	9, Florida Statutes. I further certify that the	ne information

12. I nereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is flue 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 receiper or trustee empowered to execute this leport 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:

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-8-08

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