


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90148 009 ****61.25

DOCUMENT # N01000004584					
1. Entity Name LAST CHANCE HUNT CLUB INC.					
Principal Place of Business 574 SW ZIEGLER TERR. LAKE CITY, FL 32024			Mailing Address 8473 RIVER ROAD LIVE OAK, FL 32060		
2. Principal Place of Business 7000 Big Island Ranch Rd Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Naples FL		City & State		4. FEI Number NOT APPLICABLE	
Zip 34120		Country Collier		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEASLEY, WILLIAM B 574 SW ZIEGLER TERR. LAKE CITY, FL 32024			7. Name and Address of New Registered Agent Name: James Ivey Street Address (P.O. Box Number is Not Acceptable): 7000 Big Island Ranch Rd City: Naples FL Zip Code: 34120		
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: <i>James E. Ivey</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				(NOTE: Registered Agent signature required when reinstating) DATE: 3-10-06	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, IVEY <input checked="" type="checkbox"/> Delete 2280 19TH STREET SW NAPLES, FL 34117		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROBERT COWART <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 17801 Old Bayshore Rd. N. Ft Myers, FL 33917	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EARLE, RONNIE <input type="checkbox"/> Delete 4950 CEDAR HAMMOCK CT FORT MYERS, FL 33905		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STROBLE, REX <input type="checkbox"/> Delete 8473 RIVER RD LIVE OAK, FL 32060		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing 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 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: <i>James E. Ivey</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				3-10-06 2392537481 <small>Date Daytime Phone #</small>	