

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004855

FILED
Mar 11, 2010
Secretary of State

Entity Name: NORTH FLORIDA GULF FISHING CLUB, INC.

Current Principal Place of Business:

5494 CHARLES SAMUEL DR.
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

PO BOX 14835
TALLAHASSEE, FL 323174835

New Mailing Address:

FEI Number: 71-6933154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STINSON, STEVEN W
5494 CHARLES SAMUEL DR.
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

STINSON, STEVEN W
5494 CHARLES SAMUEL DR.
TALLAHASSEE, FL 32309 US

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:

03/11/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: STINSON, STEVEN W
Address: 5494 CHARLES SAMUEL DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP
Name: JACOBS, MATHEW
Address: 128 WESTBROOK DR.
City-St-Zip: MOULTRIE, GA 31788 US

Title: DIR
Name: SIMPSON, CHARLES E JR
Address: 5713 COUNTRY SIDE DR.
City-St-Zip: TALLAHASSEE, FL 32311

Title: DIR
Name: TAYLOR, STEVE M
Address: 8725 OLD BAINBRIDGE RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: DIR
Name: VICKERS, JOHN E
Address: 8800 PEMBROKE CT.
City-St-Zip: TALLAHASSEE, FL 32311

Title: SEC
Name: SHOWMAN, KATIE
Address: 3836 WINDEMERE RD
City-St-Zip: TALLAHASSEE, FL 32311

I hereby 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 all other like empowered.

SIGNATURE: STEVE STINSON

PRES

03/11/2010

Electronic Signature of Signing Officer or Director

Date