


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2006 8:00 am
Secretary of State

02-07-2006 90027 047 ****61.25

DOCUMENT # N01000005523					
1. Entity Name GEORGE DICKEL SPORTSMAN CLUB, INC.					
Principal Place of Business 21901 CR 241 NW ALACHUA FL 32616			Mailing Address PO BOX 1252 ALACHUA FL 32616		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number NO-T APPLICABLE	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RUSHING, WINSTON 21901 CR 241 NW PO BOX 1252 ALACHUA FL 32616			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
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 _____ (NOTE: Registered Agent signature required when consulting)					
DATE _____					
FILE NOW: 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	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	RUSHING, WINSTON		NAME		
STREET ADDRESS	PO BOX 1252		STREET ADDRESS		
CITY-ST-ZIP	ALACHUA FL 32616		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CAIN, ARLEN		NAME		
STREET ADDRESS	PO BOX 1988		STREET ADDRESS		
CITY-ST-ZIP	ALACHUA FL 32616		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BRAULA, SCOTT		NAME		
STREET ADDRESS	810 BELCHER RD		STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33765-2103		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MIKE BUIE		NAME		
STREET ADDRESS	PO 1997		STREET ADDRESS		
CITY-ST-ZIP	Alachua Fl 32616		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Wayne Owens		NAME		
STREET ADDRESS	22120 NW 78 Ave		STREET ADDRESS		
CITY-ST-ZIP	Alachua Fl 32616		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby 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: <i>Winston Rushing</i>			Date: <i>2-20-06</i> Daytime Phone #: <i>386 462 9618</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



ATTACHMENT
Web 003376

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 9, 2006

GEORGE DICKEL SPORTSMAN CLUB, INC.
PO BOX 1252
ALACHUA, FL 32616

Subject: **GEORGE DICKEL SPORTSMAN CLUB, INC.**

Reference Number: **N01000005523**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cc
ANNUAL REPORTS SECTION

Symon G. Star
2-21-06