

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005523

FILED  
Feb 10, 2009  
Secretary of State

Entity Name: GEORGE DICKEL SPORTSMAN CLUB, INC.

**Current Principal Place of Business:**

21901 CR 241 NW  
ALACHUA, FL 32616

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1252  
ALACHUA, FL 32616

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RUSHING, WINSTON  
21901 CR 241 NW  
PO BOX 1252  
ALACHUA, FL 32616 US

**Name and Address of New Registered Agent:**

RUSHING, WINSTON  
21901 CR 241 NW  
ALACHUA, FL 32616 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: \_\_\_\_\_ 02/10/2009  
Electronic Signature of Registered Agent                      Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RUSHING, WINSTON  
Address: PO BOX 1252  
City-St-Zip: ALACHUA, FL 32616

Title: D ( ) Delete  
Name: CAIN, ALAN  
Address: PO BOX 1988  
City-St-Zip: ALACHUA, FL 32616

Title: D ( ) Delete  
Name: BUIE, MIKE  
Address: P.O. BOX 1047  
City-St-Zip: ALACHUA, FL 32616

Title: D ( ) Delete  
Name: OWENS, WAYNE  
Address: 22120 NORTHWEST 78 AVENUE  
City-St-Zip: ALACHUA, FL 32615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WINSTON RUSHING                      D                      02/10/2009  
Electronic Signature of Signing Officer or Director                      Date