

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006939

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** MUDDY WATERS ATV ASSOCIATION, INC.

**Current Principal Place of Business:**

2315 HYACINTH RD.  
DELAND, FL 32724

**New Principal Place of Business:**

**Current Mailing Address:**

2315 HYACINTH RD.  
DELAND, FL 32724

**New Mailing Address:**

**FEI Number:** 27-0029462      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JOHNSON, BARNEY L II  
2315 HYACINTH RD.  
DELAND, FL 32724      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: JOHNSON, BARNEY L  
Address: 2315 HYACINTH RD.  
City-St-Zip: DELAND, FL 32724

Title: VP      ( ) Delete  
Name: KERR, AARON  
Address: 3554 ELLIS LN.  
City-St-Zip: MIMS, FL 32754

Title: S      ( ) Delete  
Name: KRISTEFF, MARY  
Address: 699 PIEDMONT DR.  
City-St-Zip: DELTONA, FL 32725

Title: TD      ( ) Delete  
Name: JOHNSON, ROBYN L  
Address: 2315 HYACINTH RD.  
City-St-Zip: DELAND, FL 32724

**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: BARNEY L JOHNSON II

PD

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date