FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

(352) 563-5066 Daytime Phone *

1996

SIGNATURE: _

DOCUMENT # N02895

(3)

THE CRYSTAL RIVER ROD AND GUN CLUB, INC.

i mopar race	Or Dasir less	Mailing Address			
C/O JOHN WILSON 1160 N. STONEY POINT CRYSTAL RIVER FL 34429		C/O JOHN WILSON 1160 N. STONEY POINT CRYSTAL RIVER FL 34429			
				3. Date Incorporated or Qualified 05/07/1984	3a. Date of East Report 05/01/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 % Jo	HN F. HODGES	26 0/0 JOHN F.	HODGES	59-2408261	Not Applicable
	N. STONEY POINT	Suite, Apt. #, etc. 27 1160 N. STON		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	L RIVER, FL	City & State	•	6. Election Campaign Financing	\$5.00 May Be
23 C RY 5 / A	Country	28 CRYSTAL KIL	Country	Trust Fund Contribution	Added to Fees
24 3442 ·	9 25 USA	Harana H	30 USA	8. This corporation has liability for in Florida Statutes	tangible tax under s. 199.032, Yes 😿 No
27,0772	9. Name and Address of Current	1 1	10 0.00	10. Name and Address of New Re	
			81 Name		
HODGES	, JOHN F.			// // // // // // // // // // // // //	
1160 N. STONEY POINT				Address (P.O. Box Number is Not Acceptable)
CRYSTAL RIVER FL 34429					
01110174	111121112 01120				
			64 City		FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 617 0502 a	and 617 1508. Florida Statutes	the above named co	orporation submits this statement for the purp	
or registere	ed agent, or both, in the State of Florida h, and accept the obligations of, Sectio	 Such change was authorized. 	by the corporation's	board of directors. I hereby accept the appoi	ntment as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent ar	o title if applicable (NOTE	Rogistered Agent signature i		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PO	DELETE	1.1 TITLE	PD . Tasy F	Change Addition
NAME	HODGES, JACK F.		1.2 NAME	DORMINY, JACK F 2226 N. KINGS COVE POIN	ブ
STREET ADDRESS	2226 N. KINGS COVE POINT		1.3 STREET ADDRESS	2226 N. KINGS COVE TOTAL	,
CiTY-ST-ZiP	CRYSTAL RIVER FL 34429		14 CITY - ST - ZIP	CRYSTAL RIVER FL 34429	
TITLE	VD	₩DELETE	2 1 TITLE	VD TOULD	🔀 Change 🔲 Addition
NAME	PHILLIPS, JHON D.		2 2 NAME	PHILLIPS, JOHN D.	
STREET ADDRESS	1275 W. SUNCOAST BLVD.		2 3 STREET ADDRESS	12439 HONLEY DRIVE SPRING HILL, FL 3460	
CITY-ST-ZIP	SPRING HILL FL 34608		2 4 CITY-ST-ZIP	SPRING HILL, FL 3460	8
TITLE	STD	DELETE	31 TITLE		☐ Change ☐ Addition
NAME	HODGES, JOHN F.		3 2 NAME		
STREET ADDRESS	1160 N. STONEY POINT		3.3 STREET ADDRESS		
CITY-ST-ZIP	CRYSTAL RIVER FL 34429	Pmas. res	34 CITY-ST-ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-ST-ZIP		- Filocitic	4.4 CITY-ST-ZIP		
TITLE		□ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
City-St-ZiP		Floriete	5.4 CITY-ST-ZIP		Change Addit
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addit-on
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	u codific that the information number of	th this filing is valuated to health	6 4 CITY-ST-ZIP	plify for the exemption stated in Section 110.0	7/9VIA Elogido Statutos I fuetho:
certify that oath; that I	the information indicated on this annua	il report or supplemental annual ation or the receiver or trustee e	I report is true and ac empowered to execu-	alify for the exemption stated in Section 119.0 occurate and that my signature shall have the s te this report as required by Chapter 617, Floi	ame lega! effect as if made under

SIGNATORE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR HODGES 02-05-96