

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

04 MAR 16 AM 7:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000008320

1. Entity Name
PARADISE HUNT CLUB, INC.



Principal Place of Business
11635 NW 1ST AVENUE
GAINESVILLE, FL 32607

Mailing Address
11635 NW 1ST AVENUE
GAINESVILLE, FL 32607



01302004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

County

4. FEI Number
20-0785257

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CURTIS LAW FIRM, LLC
285 NW 138TH TERR.
SUITE 100
JONESVILLE, FL 32669

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 P
NAME RHODEN, THOMAS R
STREET ADDRESS 515 S. 6TH STREET
CITY-ST-ZIP MACCLENNY, FL 32063 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
700031860567
04/06/04--01022--021 **\$61.25 ☐ Change ☐ Addition

TITLE VP
NAME CURTIS, JOHN M SR.
STREET ADDRESS 11635 NW 1ST AVENUE
CITY-ST-ZIP GAINESVILLE, FL 32607 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SEC
NAME KNABB, TODD L
STREET ADDRESS 7436 WOODLAWN ROAD
CITY-ST-ZIP MACCLENNY, FL 32063 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

John M. Curtis
Vice President

2/26/04 352-332-0838

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #