

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 27 PM 3:13

DOCUMENT # N03433 (2)

1. Corporation Name

BRUSHY CREEK HUNTING CLUB, INC.

Principal Place of Business

6101 HWY 97A
WALNUT HILL FL 32568

Mailing Address

BRUSHY CREEK HUNTING CLUB
6301 GARRETT RD.
WALNUT HILL FL 32568
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1984

3a. Date of Last Report

04/22/1994

4. FEI Number

59-2886547

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

MCCULLOUGH, ROBERT T.
ST. RT. B, BOX 298
WALNUT HILL FL 32568

10. Name and Address of New Registered Agent

81 Name

Gibson Mervin R.

82 Street Address (P.O. Box Number is Not Acceptable)

83

7951 Pine Forest Rd.

84 City

Walnut Hill

FL

85 Zip Code

32568

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Mervin R. Gibson Mervin R. Gibson PD

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

(NOTE: Registered Agent signature required when reappointing)

1-28-95

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

MCCULLOUGH, R.T.

STREET ADDRESS

6101 HWY 97A

CITY - ST - ZIP

WALNUT HILL FL

TITLE

VD

NAME

HASSELL, B.T.

STREET ADDRESS

570 TELERAN STREET

CITY - ST - ZIP

PENSACOLA FL 32514

TITLE

STD

NAME

GIPSON, JOSEPH G.

STREET ADDRESS

8071 PINE FOREST RD

CITY - ST - ZIP

WALNUT HILL FL

TITLE

D

NAME

MALON, LON B

STREET ADDRESS

2820 HWY 188

CITY - ST - ZIP

CENTURY FL 32325

TITLE

D

NAME

GUNN, LARRY

STREET ADDRESS

6021 HWY 97A

CITY - ST - ZIP

WALNUT HILL FL

TITLE

D

NAME

GIBSON, MERVIN

STREET ADDRESS

7951 PINE FOREST RD.

CITY - ST - ZIP

WALNUT HILL FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

PD

12 NAME

Gibson Mervin R.

☒ Change

☐ Addition

13 STREET ADDRESS

7951 Pine Forest Rd.

14 CITY - ST - ZIP

Walnut Hill FL 32568

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

Brown Charles

7361 Frank Reeder Rd

Pensacola FL 32536

☒ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mervin R. Gibson Mervin R. Gibson PD 1-28-95 (904) 337-4584

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Typed Name)