## FILE NOW: FILING FEE IS \$61.25

Mar 27 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # N03433 - BRUSHY CREEK HUNTING CLUB, INC. Principal Place of Business Mailing Address **6101 HWY 97A** 6020 GOODALE LN 3. Date Incorporated or Qualified WALNUT HILL FL 32568 6301 GARRETT RD. 06/04/1984 WALNUT HILL FL 32568 4. FEI Number Applied For 59-2886547 Not Applicable 2. Principal Place of Business Mailing Address \$8.75 Additional 5. Certificate of Status Desired 6020 GOODALE LN (TOODALE Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes No This corporation owes or has paid the current year intangible Yes □ No 26 Personal Property Tax due June 30. 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GUNN, LARRY B2** Street Address (P.O. Box Number is Not Acceptable) 6020 GOODLANE 83 WALNUT HILL FL 32588 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (1097 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Channe Addition NAME **GUNN, LARRY** 1.2 NAME STREET ADDRESS **6020 GOODALE LN** 1.3 STREET ADDRESS WALNUT HILL FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KILLAM, TERRY 2.2 NAME NAME P.O. BOX 357 STREET ADDRESS 2.3 STREET ADDRESS CENTURY FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP Change DELETE Addition TITLE STD 3.1 TITLE MCCALL, MITCH NAME 3.2 NAME 5200 HWY 164 STREET ADDRESS 3.3 STREET ADDRESS MCDAVID FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE SHEPPARD, RICHARD NAME 4. 2 NAME 7373 MOBLIE HWY 4.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE PRESLEY, FRED 5.2 NAME NAME 908 LYNCH ST STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP PENSACOLA FL CITY-ST-ZIP DELETE ■ Change Addition TITLE 6.1 TITLE NAME GIDDENS, EDWARD 6.2 NAME 2000 CHRISTIAN HOME DR STREET ADORESS 6.3 STREET ADDRESS MCDAVID FL CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 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.

**FILED**