

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 27, 2008 08:00 AM  
Secretary of State

DOCUMENT # N04000000956

1. Entity Name  
FLORIDA STATE UNIVERSITY FISHING CLUB, INC.



Principal Place of Business

STUDENT ACTIVITIES CENTER  
A 305 OGELSBY UNION  
TALLAHASSEE, FL 32306

Mailing Address

2247-C SHADY TIMBERS CIRCLE  
TALLAHASSEE, FL 32304 US



03252008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

26-0079024

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

FERRIN, J.  
2247-C SHADY TIMBERS CIRCLE  
TALLAHASSEE, FL 32304

**DO NOT WRITE  
IN THIS SPACE**

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, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

U000000871733  
04/10/08-80011-002 61.25

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DUNCAN, JUSTIN W
STREET ADDRESS	228 DAY STREET
CITY-ST-ZIP	TALLAHASSEE, FL 32304
TITLE	V
NAME	FERRIN, JENNA M
STREET ADDRESS	2247-C SHADY TIMBERS CIRCLE
CITY-ST-ZIP	TALLAHASSEE, FL 32304
TITLE	EVP
NAME	BREDEHOEFT, CHRIS
STREET ADDRESS	803 TIMBERS CT
CITY-ST-ZIP	TALLAHASSEE, FL 32304
TITLE	SAA
NAME	FERRIN, JAY
STREET ADDRESS	2247-C SHADY TIMBERS CIRCLE
CITY-ST-ZIP	TALLAHASSEE, FL 32304
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Jenna M. Ferrin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/08 (561)315-4838

Date

Daytime Phone #