2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000010630

1. Entity Name

CENTRAL FLORIDA / ALABAMA HUNT CLUB INC.



FILED Apr 29, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

4840 NE 10TH ST. OCALA, FL 34470

4840 NE 10TH ST. OCALA, FL 34470





04102008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 13-4313187 Applied For Not Applicable

5. Certificate of Status Desired

4-78-08

<u>352 2368803</u>

\$8.75 Additional

6. Name and Address of Current Registered Agent

changed, or on an attachment with an addess, with all other like empowered.

BEYER, TERRY 4840 NE 10TH ST. OCALA, FL 34470

DO NOT WRITE IN THIS SPACE

		1252 664 674	00.0240240340240202020202020202020202020202		
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 as	gnature required when reinistating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS		PAGESTER STREET STREET STREET STREET STREET STREET		MATTH A SA
TITLE	PD	in the republic transfer to the constitution of the constitution of the constitution of the constitution of the constitution o	intrikani karangan kangan k Kangan kangan kanga		
NAME	BOWEN, BILLY	3	FT HIRK THE THE TOTAL THE THE TOTAL THE		
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CITY-ST-ZIP	OCALA, FL 34470				
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NAME	BOWEN, LAWRENCE J				
STREET ADDRESS	2141 NE 14TH ST.				
CITY-ST-ZIP	OCALA, FL 34470				
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NAME	BOWEN, GREG	15 FF 150 FF			
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CITY-ST-ZiP	OCALA, FL 34470				
TITLE	D	A C S K C S		THIS SPACE	
NAME	NAZZARI, PHIL				
STREET ADDRESS	3900 SE CT.				
CITY-ST-ZIP	OCALA, FL 34470		01011011010101010101010101010101010101		
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NAME	SMALLWOOD, CARL	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Specification of the second se		
STREET ADDRESS	7130 NW 35TH AVE. RD.	52 H C S H H C S H 52 H C S H			
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CITY-ST-ZIP		iiiiiii		unukati di di dikana	
12. Thereby certify that the information supplied with this filling 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					