

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012023

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** ALL STATES HUMANE GAME FOWL ORGANIZATION, INC.

**Current Principal Place of Business:**

ALL STATES HUMANE GAME FOWL ORG.  
16543 VILLAGE GREEN DR. N.  
JACKSONVILLE, FL 32234

**New Principal Place of Business:**

**Current Mailing Address:**

ALL STATES HUMANE GAME FOWL ORG.  
16543 VILLAGE GREEN DR. N.  
JACKSONVILLE, FL 32234

**New Mailing Address:**

**FEI Number:** 06-1762962

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLOUGH, RUTH  
16543 VILLAGE GREEN DR. NORTH  
JACKSONVILLE, FL 32234 US

**Name and Address of New Registered Agent:**

CLOUGH, LISA  
16543 VILLAGE GREEN DR. NORTH  
JACKSONVILLE, FL 32234 US

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.

SIGNATURE: LISA CLOUGH

02/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CLOUGH, BRUCE JR.  
Address: 16543 VILLAGE GREEN DR. NORTH  
City-St-Zip: JACKSONVILLE, FL 32234

Title: D  
Name: CLOUGH, RUTH  
Address: 16543 VILLAGE GREEN DR. N.  
City-St-Zip: JACKSONVILLE, FL 32234

Title: D  
Name: DANILES, DAVID R JR.  
Address: 4037 RODDY DR.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D  
Name: UNDERWOOD, MIKE  
Address: 3592 RUSSELL RD.  
City-St-Zip: GREEN COVE SPRING, FL 32043

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LISA CLOUGH

SEC.

02/06/2012

Electronic Signature of Signing Officer or Director

Date