

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005580

FILED
Apr 30, 2009
Secretary of State

Entity Name: CLEAR CUT HUNTING CLUB, INC.

Current Principal Place of Business:

32248 KINNE PEARCE ROAD
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

32248 KINNE PEARCE ROAD
LEESBURG, FL 34788

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, CHARLES D
907 WEBSTER STREET
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: M () Delete
Name: PEARCE, KINNE
Address: 32248 KINNE PEARCE ROAD
City-St-Zip: LEESBURG, FL 34788

Title: M () Delete
Name: CASTELLI, PETER
Address: 10649 SUMMIT SQUARE DR.
City-St-Zip: LEESBURG, FL 34748

Title: M () Delete
Name: MARSHALL, DAVID A
Address: 05634 E. HARBOR DR.
City-St-Zip: FRUITLAND PARK, FL 34731

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KINNE PEARCE

M

04/30/2009

Electronic Signature of Signing Officer or Director

Date