2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08924

FILED Jan 07, 2009 Secretary of State

Entity Name: CRANE BAY HUNTING CLUB, INCORPORATED

Current Principal Place of Business: HWY. 351 N. PO BOX 459 CROSS CITY, FL 32628			New Principal Pla	New Principal Place of Business: HWY. 351 N. # 459 CROSS CITY, FL 32628	
			# 459		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
% P.O. BC BELL, FL					
El Number	: 59-2603555	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and Addres	ss of New Registered Agent:	
5700 N.W. BELL, FL			NEENAN, JOHN T 5700 N.W. 50TH S BELL, FL 32619	TREET US	
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: J. TERRY NEENAN				01/07/2009	
	Electroni	c Signature of Registered Age	ent	Date	
OFFICER	S AND DIRECT	ORS:	ADDITIONS/CHAI	NGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	P () OSTEEN, DAVIC 149 SE 159TH A OLD TOWN, FL	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	TD () LAFLAM, THOM, 4200 WILLOW (MULBERRY, FL	DAK RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	VD () REWIS, ROBER PO BOX 716 OLD TOWN, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle:	NEENAN, JOHN 5700 NW 50TH	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address: City-St-Zip:	BELL, FL 32619				
\ddress:			Title: Name: Address: City-St-Zip:	() Change () Addition	

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: J. TERRY NEENAN SD 01/07/2009