FII NONPRC CORPORA		FI	LORIDA DEPAF Sandra E	RTMENT OF S B. Mortham	STATE						
ANNUAL RE 1996		Secretary of State DIVISION OF CORPORATIONS									
DOCUMEN 1. Corporation Name		42	(5)								
	e hunting club, i	INC.	•••								
Principal Place of Busine		Mailing Ad					i isaliliki sulituri a	JIJI FULLE UPDEN I	iii) uiu ii diule re		OLDI BIGU DURI
C/O THOMAS RHODEN 515 SOUTH 6TH STRE MACCLENNY FL 32063	ET	515 SOU	omas Rhoden Ith 6th stree NNY FL 32063			3	Date Incorporated or 08/23/1985	⁷ Qualified	3a. Date o		•
2. Principal Place of Bu	isiness	2a. Mailing	Address			4	FEI Number		V)	-+-	pplied For
Suite, Apt. #, etc.			Apt. #, etc.			5	59-2655913 Certificate of Status	Depired	\$		lot Applicable Additional
22 City & State		27 City & 3	State	<u> </u>			Certificate of Status			Fee F	Required May Be
23 Zip	Country	28 Zip					Trust Fund Contribut	ion		Added	to Fees
24	25	29		Country 30			This corporation has Florida Statutes		Yes 🗋 No		199.032,
9. Nar	me and Address of Curre	int Registereo A	gent	81	Name	10	. Name and Address	of New Re	gistered Age	nt	
MACOLEMINY EL	H STREET			83	t		· · · · · · · · · · · · · · · · · · ·				
familiar with, and ac	32063 wisions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec	ction 617.0503, Fl	e was authorized lorida Statutes.	84 s, the above-n d by the corpo	City named co poration's	board of d	lirectors. I hereby acce	for the purpo pt the appoir			Code igistered offici agent. I am
11. Pursuant to the prov or registered agent, familiar with, and ac SIGNATURE	32063 wisions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec	ction 617.0503, Fl	e was authorized lorida Statutes.	84	City named co poration's	board of d	lirectors. I hereby acce	ipt the appoir	DATE	ng its re stered a	igistered offici agent. I am
11. Pursuant to the provor registered agent, familiar with, and ac SIGNATURE Stanature type 12. ITILE	xisions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ped or printed name of registered age OFFICERS AN	ntial Such change ction 617.0503, Flu mt and title if applicable ND DIRECTORS	e was authorized lorida Statutes.	B4 s, the above-n d by the corpo E: Registered Agent 13. 11 T-LLE	City named co poration's	board of d	enstatrigi	ipt the appoir	DATE	ng its re stered a	igistered offici agent. I am
11. Pursuant to the prov or registered agent, familiar with, and ac SIGNATURE 12. TITLE PD NAME RHOE STREET ADDRESS 515 S	L 32063 wisions of Sections 617.050 or both, in the State of Flor coept the obligations of, Sec pod or printed name of registered ago OFFICERS AN DEN, THOMAS SOUTH 6TH STREET	ntial Such change ction 617.0503, Flu mt and title if applicable ND DIRECTORS	e was authorized lorida Statutes. (NO1E	B4 B4 S, the above in d by the corporation 13. 11 T-ILE 1.2 NAME 1.3 STREET	City named co poration's it signature in	board of d	enstatrigi	ipt the appoir	DATE DATE ERS AND DIF	ng its re stered a	igistered officia agent. I am
11. Pursuant to the prov or registered agent, familiar with, and ac SIGNATURE 12. 111LE PD NAME RHOU STREET ADDRESS 515 S CITY-ST-ZIP MACCO TILLE VD	L 32063 wisions of Sections 617.050 or both, in the State of Flor coept the obligations of, Sec officers An OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL	nda, such change ction 617.0503, Flu nt and the it applicable ND DIRECTORS	e was authorized lorida Statutes. (NO1E	Known and a state of the second and the second	City named co poration's it signature in	required when r	enstating) ADDITIONS/CHANGE	ipt the appoir	DATE DATE ERS AND DIF	ng its re stered a RECTOF	igistered officia agent. I am
11. Pursuant to the provor registered agent, familiar with, and ac signature type SIGNATURE Signature type 12. TITLE PD NAME RHOE STREET ADDRESS 515 S CITY-ST-ZIP MACC TILLE VD NAME GRIFF STREET ADDRESS RT 1	L 32063 wisions of Sections 617.050 or both, in the State of Flor coept the obligations of, Sec oped or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A	nda, such change ction 617.0503, Flu nt and the it applicable ND DIRECTORS	DELETE	B4 B4 S, the above in d by the corporation 13. 11 T-ILE 1.2 NAME 1.3 STREET 1.4 CITy-ST	City named oc poration's it signature in ADDRESS \$1-21P	Pres	ADDITIONS CHANGE	ipt the appoir	Date Date Date C	ng its re stered a RECTOF	gistered offic agent. I am 45 IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and ac signature type SIGNATURE Signature type 12. TITLE PD NAME RHOE STREET ADDRESS 515 S CITY-ST-ZIP MACC TITLE VD NAME GRIFF STREET ADDRESS RT 1 CITY-ST-ZIP GLEN	L 32063 wisions of Sections 617.050 or both, in the State of Flor coept the obligations of, Sec oped or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE	nda, such change ction 617.0503, Fl nt and title if applicable ND DIRECTORS	DELETE	B4 B4 S, the above in d by the corporation 13. 11 T-ILE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2 TTUE 2 NAME 2.3 STREET 2.4 CITY-S	City named oc poration's it signature in ADDRESS \$1-21P	Pres	enstating) ADDITIONS/CHANGE	ipt the appoir	Class of changin DATE E RS AND DIF C C C C C C C C C C C C C	ng its restered a	gistered offic agent. 1 am RS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and ac signature type SIGNATURE Signature type 12. TITLE PD NAME RHOE STREET ADDRESS 515 S CITY-ST-ZIP MACC NAME GRIFF STREET ADDRESS RT 1 CITY-ST-ZIP GLEN TITLE SD NAME BALEE	L 32063 wisions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ped or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL SS, ROLAND	nda, such change ction 617.0503, Fl nt and title if applicable ND DIRECTORS	DELETE	B4 B4 S, the above in d by the corporation 13. 11 T-ILE 1.2 NAME 1.3 STREET 1.4 C(1) - S1 2 1 TIL(E 2.2 NAME 2.3 STREET.	City named oc poration's it signature in ADDRESS \$1-21P	Pres	ADDITIONS CHANGE	DT the appoir	C	ng its restered a	gistered offic agent. I am 45 IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and ac signature type SIGNATURE Signature type 12. TITLE PD NAME RHOE STREET ADDRESS 515 S CITY-ST-ZIP MACC NAME GRIFF STREET ADDRESS RT 1 CITY-ST-ZIP GLEN TITLE SD NAME BALES STREET ADDRESS RT 4	L 32063 visions of Sections 617.050 , or both, in the State of Flor coept the obligations of, Sec pad or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL SS, ROLAND BOX 338 N/A	nda, such change ction 617.0503, Fl nt and title if applicable ND DIRECTORS	DELETE	B4 B4 S, the above in d by the corporation 13. 11 Tille 1.2 NAME 1.3 STREET 1.4 CITY-SI 2 1 TILE 2.3 STREET 2.4 CITY-S 3 TITLE 3.3 STREET	City named cc poration's it signature in ADDRESS S1-2IP ADDRESS	Pres	ADDITIONS CHANGE	DT the appoir	Class of changin DATE E RS AND DIF C C C C C C C C C C C C C	ng its restered a	gistered offic agent. 1 am RS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and according to registered agent, familiar with, and according to registered agent, familiar with, and according to registere types. SIGNATURE SIGNATURE Stanature types 12. TITLE PD NAME RHOE STREET ADDRESS 515 S CITY-ST-ZIP MACCO NAME SRIFF STREET ADDRESS RT 1 CITY-ST-ZIP GLEN TITLE SD NAME BALE STREET ADDRESS RT 4 CITY-ST-ZIP LAKE TITLE TD	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL	rida, Such change ction 617.0503, Fl nit and title if applicable ND DIRECTORS	DELETE	B4 B4 S, the above in d by the corporation 13. 11 Tille 1.2 NAME 1.3 STREET 1.4 CITY-S 2 TITLE 2 NAME 2.3 STREET 2 A OTY-S 3 TITLE 3 STREET 3 STREET 3 A CITY-S 4 TITLE	City named cc poration's it signature in ADDRESS S1-2IP ADDRESS	Pres	ADDITIONS CHANGE	DT the appoir	Class of changin DATE E RS AND DIF C C C C C C C C C C C C C	ng its restered a	gistered offic agent. 1 am RS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and according with a structure to the str	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE	rida, Such change ction 617.0503, Fl nit and title if applicable ND DIRECTORS	DELETE	B4 B4 s, the above in d by the corporation of the c	City named cc poration's it signature in ADDRESS S1-2IP ADDRESS S1-2IP	Pres	ADDITIONS CHANGE	DT the appoir	Class of changin DATE DATE E RS AND DIF C C C C C C C C C C C C C	ng its restered a	igistered official agent. I am RS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and according with a street ADDRESS TITLE PD NAME RHOE STREET ADDRESS 515 S CITY - ST - ZIP MACCO NAME GRIFF STREET ADDRESS RT 1 CITY - ST - ZIP GLEN ITLE SD NAME BALES STREET ADDRESS RT 4 CITY - ST - ZIP LAKE TITLE DAVIS STREET ADDRESS RT 4 CITY - ST - ZIP LAKE TITLE TD NAME DAVIS STREET ADDRESS 226 C CITY - ST - ZIP SAND	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL	India, Such change ction 617.0503, Fli nd diffe if applicable ND DIRECTORS	DELETE	84 s, the above in d by the corporation of t	City named ccooration's int signature in ADDRESS S1 - 2IP ADDRESS S1 - 2IP ADDRESS S1 - 2IP	Pres	ADDITIONS CHANGE	DT the appoir	Cr Cr Cr	ng its restered a	igistered official agent. I am RS IN 12 Addition
11. Pursuant to the promore registered agent, familiar with, and according with a street address 11. Pursuant to the promoter of registere to the street address Street Address 515 S CITY-ST-ZIP MACCO NAME SRIFF STREET Address RT 1 CITY-ST-ZIP GLEN TITLE SD NAME BALES STREET Address RT 4 CITY-ST-ZIP LAKE TITLE TD NAME DAVIS STREET Address 226 C	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE CEDAR CREEK DRIVE	India, Such change ction 617.0503, Fli nd diffe if applicable ND DIRECTORS	DELETE	84 s, the above in d by the corporation of t	City named ccooration's int signature in ADDRESS S1 - 2IP ADDRESS S1 - 2IP ADDRESS S1 - 2IP	Pres	ADDITIONS CHANGE	DT the appoir	Class of changin DATE DATE E RS AND DIF C C C C C C C C C C C C C	ng its restered a	igistered official agent. I am RS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and ac SIGNATURE Signature type 12. TITLE PD NAME RHOL STREET ADDRESS 515 S CITY - ST-ZIP MACC TITLE VD NAME GRIFF STREET ADDRESS RT 1 CITY - ST-ZIP GLEN TITLE SD NAME SALES STREET ADDRESS RT 4 CITY - ST-ZIP LAKE TITLE TD NAME DAVIS STREET ADDRESS 226 C CITY - ST-ZIP SAND TITLE TD NAME DAVIS STREET ADDRESS 226 C CITY - ST-ZIP SAND TITLE NAME	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE CEDAR CREEK DRIVE	India, Such change ction 617.0503, Fli nd diffe if applicable ND DIRECTORS	DELETE	84 s, the above in d by the corporation of t	City named cc poration's it signature in ADDRESS S1- 2IP ADDRESS S1- 2IP ADDRESS S1- 2IP ADDRESS S1- 2IP	Pres	ADDITIONS CHANGE	DT the appoir	Cr Cr Cr	ng its restered a	igistered offic agent. I am IS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and ac signature type SIGNATURE Signature type 12. TITLE PD NAME RHOL STREET ADDRESS 515 S CITY - ST-ZIP MACC TITLE VD NAME GRIFF STREET ADDRESS RT 1 CITY - ST-ZIP GLEN TITLE SD NAME BALES STREET ADDRESS RT 4 CITY - ST-ZIP LAKE TITLE TD NAME DAVIS STREET ADDRESS 226 C CITY - ST-ZIP SAND TITLE NAME STREET ADDRESS 226 C CITY - ST-ZIP SAND TITLE NAME STREET ADDRESS 226 C CITY - ST-ZIP SAND TITLE NAME STREET ADDRESS CITY - ST-ZIP	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE CEDAR CREEK DRIVE	India, Such change ction 617.0503, Fli ND DIRECTORS	DELETE	B4 B4 s, the above in d by the corporation of the c	City named cc poration's it signature in ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP	Pres	ADDITIONS CHANGE	DT the appoir		ng its restered a	gistered offic agent. I am RS IN 12 Addition Addition
11. Pursuant to the provor registered agent, familiar with, and according with a street Address 12. Stanature type 12. Stanature type 12. MAME NAME PD NAME STREET Address STREET Address RT 1 CHY - ST - ZIP GLEN TITLE SD NAME BALE4 STREET Address RT 4 CHY - ST - ZIP LAKE TITLE SD NAME BALE4 STREET Address RT 4 CHY - ST - ZIP LAKE TITLE TD NAME DAVIS STREET ADDRESS 226 C CHY - ST - ZIP SAND TITLE NAME STREET ADDRESS 226 C CHY - ST - ZIP SAND TITLE NAME STREET ADDRESS CHY - ST - ZIP TITLE NAME STREET ADDRESS CHY - ST - ZIP TITLE	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE CEDAR CREEK DRIVE	India, Such change ction 617.0503, Fli ND DIRECTORS	DELETE	B4 B4 s, the above in d by the corporation of the c	City named cc poration's it signature in ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP	Pres	ADDITIONS CHANGE	DT the appoir	Cr Cr Cr	ng its restered a	igistered offic agent. I am IS IN 12 Addition
11. Pursuant to the provor registered agent, familiar with, and according with and according with and according with a street ADDRESS 12. Ittle PD NAME RHOE STREET ADDRESS 515 S CITY - ST - ZIP MACCO TITLE VD NAME GRIFF STREET ADDRESS RT 1 CITY - ST - ZIP GLEN TITLE SD NAME BALE3 STREET ADDRESS RT 4 CITY - ST - ZIP LAKE TITLE TD NAME DAVIS STREET ADDRESS 226 C CITY - ST - ZIP SAND TITLE TD NAME SAND STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME S	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE CEDAR CREEK DRIVE	India, Such change ction 617.0503, Fli ND DIRECTORS	DELETE	B4 B4 s, the above in d by the corporation of the c	City named cc poration's it signature in ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP	Pres	ADDITIONS CHANGE	DT the appoir		ng its restered a	gistered offic agent. I am RS IN 12 Addition Addition
11. Pursuant to the provor registered agent, familiar with, and according with and according with and according with and according with a second with a	L 32063 visions of Sections 617.050 , or both, in the State of Flor ccept the obligations of, Sec ved or printed name of registered age OFFICERS AN DEN, THOMAS SOUTH 6TH STREET CLENNY FL FIS, DOYLE BOX 103 N/A N ST MARY FL S, ROLAND BOX 338 N/A CITY FL S, RONNIE CEDAR CREEK DRIVE	I with this filing is v		B4 s, the above in d by the corporation of the co	City named cc poration's it signature in ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP ADDRESS S1- ZIP	VD PRes RE. 1 SA w	Exemption stated in Se	20100 119.07		ng its restered a	gistered offic agent. 1 am (S IN 12 Addition Addition Addition Addition Addition Addition