

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N16387

1. Entity Name

RIVER HILL HUNTING CLUB, INC.

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90005 030 ****70.00

Principal Place of Business

Mailing Address

C/O STEVE BRAY
P.O. BOX 308
JAY FL 32565
US

C/O STEVE BRAY
P.O. BOX 308
JAY FL 32565-0308
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRAY, STEVE
2892 MCDUFFIE LANE
JAY FL 32565

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BRAY, DEREK
2892 MCDUFFIE LANE
JAY FL 32565 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
NELSON, JIMMY
RT 2 BOX 150
JAY FL 32565 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
NELSON, JIMMY
3110 PINE LEVEL CHURCH RD
JAY, FL. 32565 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JONES, JERRY
11800 HIGHWAY 89
JAY FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JONES, JERRY
12011 HWY 89
JAY, FL. 32565 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JONES, JIMMY
2858 MEADOWBROOK LANE
JAY FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
POST
BRAY, STEVE
2892 MCDUFFIE LANE
JAY FL 32565 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Steve Bray
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bray - President 03-14-00 (850) 675-4597

Date

Daytime Phone #

CR2E037 (9/99)