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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(9)

POND CREEK HUNTING CLUB, INC.

Maling Address ROUTE 2 BOX 403 MUTON IN 2571-8100 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 2. Principal Place of Business Suite, April 4, etc. 3. Clay & State Suite, April 4, etc. 3. Clay & State City	POND	Cheek Holdtild Glob,	IIV.			
ROUTE 2 BOX 403 MICTON FL 30571-6100 2. Principal Place of Business 2. Principal Place of Business 3. Data Place Report 04/25/1995 3. Data Place Report 05/25/1995 3. Data Place Report 3. Da	Principal Place	of Business	Mailing Address			
2. Principal Place of Business	ROUTE 2 BOX 403		ROUTE 2 BOX 403	ROUTE 2 BOX 403		
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Suite. April #, etc. 22 23 25 26 27 28 29 29 29 29 29 29 20 20	Principal Place of Business Total		├─ŋ <u>*</u>	├ - ¬		E0-0070070
22)	Suite, Apt. #, etc.		27	27		
Zip Country Zip Sin Sin Country Zip Sin Sin Country Sin Sin Country Sin				h-mag		
SPEARS, WASTLE ROUTE 2 BOX 403 MILTON FL 32571 15. Pursuant to the provisions of Sections 617 0502 and 617 1508, Floride Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered agent. I am Brillie with, and cacept the obligation of Sections of Piologa. Such change was submixed by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Brillie with, and cacept the obligation of Section 1908, Floride Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. I am Brillie with, and cacept the obligation of, Section 1913, 93, 94, 94, 94, 94, 94, 94, 94, 94, 94, 94	Ζιρ	} 1	— ·	· — ·		
SPEARS, WASTLE ROUTE 2 BOX 403 MILTON FL 32571 82 Street Address (P.O. Box Number is Not Acceptable) 15. Pursuant to the provisions of Sections 517 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. an advantage was authorized by the corporation's board of directors. I hereby accept the depoinment as registered agent an advantage was authorized by the corporation's board of directors. I hereby accept the depoinment as registered agent and familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14 MILTON FL 15 MAKE 15 MILTON FL 16 MILTON FL 16 MILTON FL 17 MILTON FL 18 DELETE 21 TITLE 18 STD 18 DELETE 21 TITLE 57 D 10 MILTON FL 23 STREET ADDRESS 16 Through Addition 17 MILTON FL 24 DITY 51 72P 18 DELETE 21 TITLE 57 D 18 D 18 DELETE 21 TITLE 57 D 18 D						10. Name and Address of New Registered Agent
ROUTE 2 80X 403 MILTON FL 32571 BS City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617 6050, Florids Statutes. SIGNATURE Signature PO				81	Name	
ROUTE 2 BOX 403 MILTON FL 32571 B3 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby eccept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby eccept the appointment as registered agent. I make agent to the purpose of changing its registered spent or bring the provision of the purpose of changing its registered spent or bring the purpose of the purpose of changing its registered spent or bring the purpose of changing its registered spent as a purpose of the purpose of changing its registered spent as a purpose of the purpose of t	SPEARS, WASTLE				Street A	Address (P.O. Box Number is Not Acceptable)
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19. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503. Florida Statutes. SIGNATURE				84	City	FL 85 Zip Code
Agent. I am Tamillar with, and accept the obligations of, Section 617,0503, Floridad Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS TITLE PD SPEARS, WASTLE STREET ADDRESS ROUTE 2 BOX 403 DELETE 11 TITLE PD DELETE 11 TITLE PD STREET ADDRESS CITY-ST-2P MILTON FL STD STREET ADDRESS CITY-ST-2P MILTON FL STD STREET ADDRESS CITY-ST-2P MILTON FL STD DELETE STD STREET ADDRESS CITY-ST-2P MILTON FL STD DELETE STD STREET ADDRESS CITY-ST-2P MILTON FL STREET ADDRESS CITY-ST-2P PENSACOLA FL STREET ADDRESS STREET A	11. Pursuant to	o the provisions of Sections 617.0	0502 and 617.1508, Florida Statut	tes, the above	-named o	corporation submits this statement for the purpose of changing its registered
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information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path, 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 12 or Block 13 if changed, or on an attachment with an address.	information	n indicated on this annual report i ficer or director of the corporation in Block 12 or Block 13 if changed	or supplemental annual report is to nor the receiver or trustee empoy I, or on an attachmen <u>t wi</u> th an ad	true and accu wered to exec dress.	urate and oute this re	that my signature shall have the same legal effect as if made under path: that

904-623-7/81 ext. 53

Daytime Phone # 0074524

FILED

Mar 26 1997 8:00am

Secretary of State