2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 08, 2009 Secretary of State DOCUMENT# N17135

Entity Name: WARREN ISLAND HUNTING CLUB, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

FOLKSTON, G2 FOLKSTON, G2

2824 STATÉ ROAD 13 126 PALM VALLEY WOODS DRIVE JACKSONVILLE, FL 32259 US PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address: New Mailing Address:

2824 STATE ROAD 13 126 PALM VALLEY WOODS DRIVE JACKSONVILLE, FL 32259 US PONTE VEDRA BEACH, FL 32082 US

FEI Number: 59-2795362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILSON, JON K HARTLEY, SCOTT 10055 RÚSSELL SAMPSON ROAD 9300 C.R. 13

ST. JOHNS, FL 32056 US ST. JOHNS, FL 32259

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: SCOTT HARTLEY 10/08/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

ALBRITTON, LANCE KNIGHT, JAMES F II Name: Name: 11262 ENGLISH MOSS LANE Address: 126 PALM VALLEY WOODS DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: (X) Delete Title: () Change () Addition

WILSON, JON K Name: Name: Address: 10055 RUSSELL SAMPSON RD Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip:

Title: (X) Delete Title: () Change () Addition WILSON, JANICE R Name: Name:

10025 RUSSELL SAMPSON ROAD Address: Address: City-St-Zip: ST. JOHNS, FL 32259 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

Name: WILSON, TODD Name: 10070 RUSSELL SAMPSON RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 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: JAMES F. KNIGHT II S/T 10/08/2009