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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17715

1. Corporation Name

COLDWATER HUNTING CLUB, INC.

Principal Place of Business

% PAUL FLINN
550 SIMMIE LEWIS RD
MILTON FL 32570
US

Mailing Address

550 JIMMY LEWIS RD.
MILTON FL 32570
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

11/10/1986

4. FEI Number

59-2734322

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FLINN, PAUL
RT.6, BOX 252
MILTON FL 32570

10. Name and Address of New Registered Agent

81 Name

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

83

84 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 office or registered agent, or both, in the State of Florida. 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
FLINN, SHANNON
554 SIMMIE LEWIS RD
MILTON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, JOEL T.
RT.3, BOX 96
MILTON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVIS, JERRY
RT.3, BOX 97
MILTON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
FLINN, LANCE A.
7028 RYAN LANE
MILTON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HOLLEY, MILLARD
RT.3, BOX 205
MILTON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
FLINN, PAUL
RT.6, BOX 252
MILTON FL 32570

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

640 Jimmy Lewis Rd.
Milton, Fla. 32570

Change Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Change Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE RESHANNON D. FLINN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-4-99 850-623-0856
Date Daytime Phone #

CR2E037 (11/98)