FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

N20614 DOCUMENT #
1. Corporation Name

(6)

S & W HUNTING CLUB, INC.

S & W HUNTING CLUB, INC.											
Principal Place	of Business	Mailing Address					i effettiåt åre tian kansk anner men e				
C/O FOY L. B 4631 DEERFIE PENSACOLA F	LD DRIVE	C/O FOY L. BEASLEY 4631 DEERFIELD DRIV PENSACOLA FL 3252	/E				Date Incorporated or Qualified	3a. Da	ite of Last F	Report	
							05/12/1987		03/15/19		
2. Principal Pla	ce of Business	2a. Mailing Address				59-2454495 Not Appli			pplied For lot Applicable		
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees				
Zip	Country	Zip	Co	untry			8. This corporation has liability for in			199.032,	
24	25	29	30				Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	9. Name and Address of Curre	nt Registered Agent		ļ <u>.</u> .			10. Name and Address of New Re	egistered	Agent		
				61	Name						
BEASLEY, FOY L. 4631 DEERFIELD DRIVE				82	Street #	Addres	ss (P.O. Box Number is Not Acceptable)				
	OLA FL 32526			83			•				
				84	1			FL	.	Code	
	o the provisions of Sections 617.050 ed agent, or both, in the State of Flo h, and accept the obligations of, Sec	nga. Such change was autho ction 617.0503, Florida Statut	es.	COL	oration 5		on submits this statement for the pur of directors. I hereby accept the appo		anging its re registered	agent. I am	
	Signature typed or printed name of registored age		(NOTE: Registere	<u> </u>	nt signature re	equired w	hen reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS ANI	DIRECTO	BS IN 12	
12.		ND DIRECTORS DELETE		13. 1.1 TOTLE			ADDITIONS/GHANGES TO GIT		Change	Addition	
TITLE	D Patterson, Doug			1.2 NAME 1.3 STREET ADDRESS]					
NAME	1116 ISABELLA ROAD										
STREET ADDRESS	CANTONMENT FL			1.4 CITY-ST-ZIP							
CITY-ST-ZIP TITLE	D			2.1 TITLE					Change	☐ Addition	
NAME	WHITE, NATHAN	/`	22 NAM			ļ					
STREET ADDRESS	8357 MOBILE HWY		2.3	STREE	TREET ADDRESS						
CITY-ST-ZIP	PENSACOLA FL			2 4 CITY-ST-ZIP		<u> </u>					
TITLE	D	DELETE	3.1	TITLE					Change	Addition	
NAME	BUSH, WILLIAM C.		32	NAME							
STREET ADDRESS	3710 HIGHWAY 297-A		33	STREE	T ADDRESS	1					
CITY - ST - ZIP	CANTONMENT FL	The state of the s			-ST-ZIP	┨—			Change	Addition	
TITLE	P COULTED 5 A	DELETE	- 1	TITLE					ondrigo		
NAME	SCHLUTER, E.A.		,,,,	NAM	_						
STREET ADDRESS	109 FLORIDA AVENUE			-	et address						
CITY-ST-ZIP	GULF BREEZE FL ST	DELETE		TITLE	ST-ZIP	 			Change	Addition	
TITLE	BEASLEY, FOY L.	Decem									
NAME	4631 DEERFIELD DR.	4.			5.3 STREET ADDRESS						
STREET ADDRESS	PENSACOLA FL				ST-ZIP						
CITY-ST-ZIP	I CHONOULN I L	DELETE		TITLE		1			Change	Addition	
TITLE				NAMI		1					
NAME CARCET ADODESCE					- et address						
STREET ADDRESS			I 0.			1					

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 eath; 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.

SIGNATURE:

SIGNATURE:

Date

Date