

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22624

FILED
Jan 30, 2009
Secretary of State

Entity Name: PINELLAS COUNTY HUNTER ASSOCIATION, INC.

Current Principal Place of Business:

8333 SHAW RD.
BROOKSVILLE, FL 34602 US

New Principal Place of Business:

Current Mailing Address:

C/O JEANNE HATCH
8333 SHAW RD.
BROOKSVILLE, FL 34602 US

New Mailing Address:

FEI Number: 59-3487826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JEANNE A
8333 SHAW RD.
BROOKSVILLE, FL 34602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POLETZ, MINDY P
Address: P.O. BOX 919
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: VP () Delete
Name: FLAMMIA, PAT
Address: 139 CITRUS AV
City-St-Zip: DUNEDIN, FL 34698

Title: T () Delete
Name: HATCH, JEANNE,
Address: 8333 SHAW RD.
City-St-Zip: BROOKSVILLE, FL 34602

Title: R.S. () Delete
Name: SCHWARZJOPF, TRISH
Address: 3197 GARRISON RD
City-St-Zip: PALM HARBOR, FL 34683

Title: D () Delete
Name: POWERS, GENGANN
Address: 9595 166 ST NO
City-St-Zip: PINELLAS PARK, FL 33782

Title: D () Delete
Name: DRAIN, MICHELLE
Address: 6301-86 AVE NO
City-St-Zip: PINELLAS PARK, FL 33782

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JAN, BAKER P
Address: 18205 30 ST
City-St-Zip: LUTZ, FL 33559 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JEANNE A. HATCH

TREA

01/30/2009

Electronic Signature of Signing Officer or Director

Date