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**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90067 048 \*\*\*\*70.00

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N26211**

1. Corporation Name

**GATOR CREEK HUNTING CLUB, INC.**

Principal Place of Business

Mailing Address

REED, RONALD D  
 3325 DUNNING DR  
 PACE FL 32571  
 US

REED, RONALD D  
 3325 DUNNING DR  
 PACE FL 32571  
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

05/02/1988

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number  
 NOT APPLICABLE

Applied For  
 Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing  
 Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REED, RONALD D  
 3325 DUNNING DR  
 PACE FL 32571

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME REED, RONALD D  
 STREET ADDRESS 3325 DUNNING DR  
 CITY-ST-ZIP PACE FL 32571

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME D Cecil Hatcher  
 1.3 STREET ADDRESS 6098 Sunnyridge Dr  
 1.4 CITY-ST-ZIP Milton, FL 32570

TITLE ☐ DELETE

NAME HOLLEY, DUKE  
 STREET ADDRESS RT 2 BOX 155A  
 CITY-ST-ZIP BAKER FL 32531

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME William B. Moon  
 2.3 STREET ADDRESS 4225 Montaigne Dr  
 2.4 CITY-ST-ZIP Pensacola, FL 32504

TITLE ☐ DELETE

NAME ASKEW, WILLIAM  
 STREET ADDRESS 5432 INWOOD DR  
 CITY-ST-ZIP PACE FL 32571

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME V Shalvie Holley  
 3.3 STREET ADDRESS 1451 Pineview Church Rd  
 3.4 CITY-ST-ZIP Milton, FL 32570

TITLE ☒ DELETE

NAME CLARKE, RANDY  
 STREET ADDRESS RT 2 BOX 158A  
 CITY-ST-ZIP BAKER FL 32531

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

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:

*Ronald D. Reed*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-4-99

850-474-0999

Date

Daytime Phone #

CR2E037 (11/98)