

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90039 035 ****70.00

DOCUMENT # N28091

1. Entity Name

BAPTIZING CREEK HUNTING CLUB, INC.



Principal Place of Business

% AUBREY JACKSON
PO BOX H90
JAY FL 32565

Mailing Address

% AUBREY JACKSON
PO BOX H90
JAY FL 32565

2. Principal Place of Business

Julius Middleton

Suite, Apt. #, etc.

PO Box 567

City & State

Jay Florida

Zip

32565

Country

USA

3. Mailing Address

Julius Middleton

Suite, Apt. #, etc.

PO Box 567

City & State

Jay Florida

Zip

32565

Country

USA



1st MOORE

CR2E037 (10/04)

4. FEI Number

59-2911051

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WESTMORELAND, J. LOFTON
220 W. GARDEN ST., FL-9
SUN BAK TOWER
PENSACOLA FL 32598-1792

7. Name and Address of New Registered Agent

Name: George Daniel Stewart

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

4519 Hwy 90

City

Pace

FL

Zip Code

32571

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

George Daniel Stewart

March 17/2005

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

**9. Election Campaign Financing
Trust Fund Contribution.**

☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D **NAME** WATSON, ROGER **STREET ADDRESS** 3354 HWY 4 **CITY-ST-ZIP** JAY FL 32565 ☐ Delete

TITLE STD **NAME** JACKSON, A., B. **STREET ADDRESS** 4599 CARR RD. **CITY-ST-ZIP** JAY FL ☒ Delete

TITLE D **NAME** WESTMORELAND, DALE **STREET ADDRESS** 103 PINE ST. **CITY-ST-ZIP** JAY FL 32565 ☒ Delete

TITLE VD **NAME** BOUTWELL, DONALD **STREET ADDRESS** BOX 383, 409 W. ESCAMBIA AVE. **CITY-ST-ZIP** JAY FL ☐ Delete

TITLE P **NAME** MIDDLETON, JULIUS **STREET ADDRESS** 2279 NELSONTOWN RD **CITY-ST-ZIP** JACKSONVILLE FL 32565 ☐ Delete

TITLE ~~Director, George~~ **NAME** ~~George~~ **STREET ADDRESS** ~~George~~ **CITY-ST-ZIP** ~~George~~ ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D **NAME** Smith Greg **STREET ADDRESS** 5733 Ballard Rd **CITY-ST-ZIP** Milton, FL 32570 ☒ Change ☒ Addition

TITLE D **NAME** Nowling, Jerry **STREET ADDRESS** 4224 Mart Fernigan Rd **CITY-ST-ZIP** Jay, Florida 32565 ☐ Change ☒ Addition

TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ Change ☐ Addition

TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ Change ☐ Addition

TITLE P **NAME** Middleton, Julius **STREET ADDRESS** PO Box 567 **CITY-ST-ZIP** Jay, FL, 32565 ☒ Change ☐ Addition

TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Julius Middleton Julius Middleton

03/18/05

850 675 4638

Date

Daytime Phone #