

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28091

FILED
Jan 21, 2009
Secretary of State

Entity Name: BAPTIZING CREEK HUNTING CLUB, INC.

Current Principal Place of Business:

JULIUS MIDDLETON
P O BOX 567
JAY, FL 32565

New Principal Place of Business:

JULIUS MIDDLETON
4363 SPRING STREET
JAY, FL 32565

Current Mailing Address:

JULIUS MIDDLETON
P O BOX 567
JAY, FL 32565

New Mailing Address:

FEI Number: 59-2911051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIDDLETON, JULIUS
4363 SPRING ST
JAY, FL 32565 US

Name and Address of New Registered Agent:

MIDDLETON, JULIUS
4363 SPRING ST
JAY, FL 32565 US

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: JULIUS MIDDLETON

01/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JERNIGAN, ERNEST
Address: 6486 OLD POLLARD RD
City-St-Zip: JAY, FL 32565

Title: D () Delete
Name: NOWLING, JERRY
Address: 4224 MART JERNIGON RD
City-St-Zip: JAY, FL 32565

Title: VD () Delete
Name: BOUTWELL, DONALD,
Address: BOX 383, 409 W. ESCAMBIA AVE.
City-St-Zip: JAY, FL

Title: P () Delete
Name: MIDDLETON, JULIUS
Address: P O BOX 567
City-St-Zip: JACKSONVILLE, FL 32565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
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: JULIUS MIDDLETON

PRES

01/21/2009

Electronic Signature of Signing Officer or Director

Date