

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32402

FILED
Mar 22, 2005
Secretary of State

Entity Name: THE NORTH PINEVILLE SPORTSMAN CLUB, INC.

Current Principal Place of Business:

6900 HWY 97-A
WALNUT HILL, FL 32568 US

New Principal Place of Business:

Current Mailing Address:

6900 HWY 97-A
WALNUT HILL, FL 32568 US

New Mailing Address:

FEI Number: 59-3007910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLOUD, RONNIE
6900 HWY 97-A
MC DAVID, FL 32568 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: PD () Delete
Name: CLOUD, RONNIE
Address: 6900 HWY 97-A
City-St-Zip: MC DAVID, FL 32568

Title: VD () Delete
Name: WILLIAMS, JOHN
Address: 1549 WILLIAMS DITCH ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: STD () Delete
Name: SHIRLEY, EDDIE
Address: 1472 STEFANI CIRCLE
City-St-Zip: CANTONMENT, FL 32533

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RONNIE CLOUD

PD

03/22/2005

Electronic Signature of Signing Officer or Director

Date