

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # N34981

1. Entity Name

COOKS HAMMOCK HUNTING CLUB, INC.



Principal Place of Business

Mailing Address

10253 S. STATE ROAD 51
MAYO FL 32066
US

10253 S. STATE ROAD 51
MAYO FL 32066
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3009675

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ADKINS, GERALDINE
10253 S. STATE ROAD 51
MAYO FL 32066

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME ADKINS, BILL
STREET ADDRESS 10253 S. STATE ROAD 51
CITY ST ZIP MAYO FL 32066

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP
000000604476
01/29/07-80055-018 70.00

TITLE VPD ☐ Delete
NAME SPIKES, BILL
STREET ADDRESS RT. 4, BOX 91
CITY ST ZIP BRANFORD FL 32008

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE STD ☐ Delete
NAME ADKINS, GERALDINE
STREET ADDRESS 10253 S. STATE ROAD 51
CITY ST ZIP MAYO FL 32066

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE D ☐ Delete
NAME GAMBLE, BILLY
STREET ADDRESS 420 S.E. TROUT LANE
CITY ST ZIP MAYO FL 32066

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: GERALDINE ADKINS *Geraldine Adkins*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-07

Date

(386) 294-1043

Daytime Phone