## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N35184**

1. Entity Name
JOHNSON SWAMP HUNTING CLUB, INC.



Jul 17, 2007 08:00 AN Secretary of State

Principal Place of Business

18712 NE HAYES SUBDIVISION RD BLOUNTSTOWN, FL 32424

Mailing Address

18712 NE HAYES SUBDIVISION RD BLOUNTSTOWN, FL 32424



DO NOT WRITE IN THIS SPAC				4. FEI Numb	per	Applied For Not Applicable \$8.75 Additional
6. Name and Address of Current Registered Agent				<del></del>		Fee Required
TERRY, JR., C.T. RR 2 BOX 647 BLOUNTSTOWN, FL 32424			•	-	NOT WRIT	
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.						
				nt signature required when reinstating) DATE		
Filling Fee is \$61.25  Due by September 14, 2007  9. Election Campaign Financia Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS			•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRY, C T JR 18712 NE HAYES SUBDIVISION RD BLOUNTSTOWN, FL 32424					32 <b>8</b> 4
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS, J W 18693 NE HAYES SUBDIVISON RD BLOUNTSTOWN, FL 32424				07/ĬŸŸŎŸ~ĠŎŨ *	
ITTLE NAME STREET ADORESS CITY-ST-ZIP	D MCMILLIAN, STEVEN PEA RIDGE ROAD BRISTOL, FL		,	DO	NOT WRI	TE 👷
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	IN	THIS SPAC	<b>E</b>
TITLE NAME SIREET ADDRESS					٠.	*

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

CITY-SI-ZIP

TITLE

NAME

STREET ADDRESS

CITY-SI-ZIP

MATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTO

7-13-07 (850) 674.872

Daytime Phone