FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUI 1. Corporatio	MENT # N3525 4	4 (4)							
LITTLE SWEETWATER HUNTING CLUB, INC.									
Principal Place of Business Mailing Address						19011101 000 (1911 91910 1400) 11		IBII DIBII BIBII DI	DII BION 1001
M DAVID E. PITTS M DAVID E. PITTS						3. Date Incorporated or Qualifie			
323 CYPRESS S		323 CYPRESS ST. BLOUNTSTOWN FL 32424			11/17/1989				
BLOOMISION	FC 32424	DECUMPATION PE 32424				4. FEI Number		 	plied For
2 Principal D	lace of Business	2a. Mailing Address				59-3011950			ot Applicable
2. Filicipal F	lace of business	26			5. Certificate of Status Desired			Additional equired	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing		\$5.00		
City & Stat	9	Crity & State			Trust Fund Contribution		Added to		
23		28			7. Is this nonprofit corporation a homeowners association? Yes No				
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has	paid the cu	urrent year Int	angible
24						Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Current	Hegistered Agent		81	Name	10, Name and Address of New	Hegistered	Адепт	
PITTS, DAVID E									
323 CYPRESS ST.			l'	82	Street Addr	ress (P.O. Box Number is Not Accep	otable)		
BLOUNTSTOWN FL 32424			1	83					
				84	City			85 Zip	Code
14 D						A 150	FI	_ "	
l	to the provisions of Sections 617.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was autions of, Section 617.0503, Flori	ithorized ida Statu	by tutes.	the corporat	tion's board of directors. I hereby ac	cept the ap	pointment as	registered
SIGNATURE .	Signature, typed or printed name of registered agent	and title If applicable. (NOTE:	Registered	Agent	t signature requi	red when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE				1.1 TITLE				Change	Addition
NAME STREET ADDRESS				1.2 NAME 1.3 STREET ADDRESS					
CITY-ST-ZIP	ADIOTAL EL		-	1.4 CITY-ST-ZIP					
TITLE				2.1 TITLE				☐ Change	Addition
NAME			2.2 NA	2.2 NAME					
STREET ADDRESS	HODEODD TI			2.3 STREET ADDRESS					
CITY-ST-ZIP	HOSFORD FL			2.4 CITY-ST-ZIP 3.1 TITLE				Change	Addition
TITLE NAME	PULLAM, RHODEN	32)						— crange	
STREET ADDRESS	RT. 1 BOX 48				DORESS				
CITY-ST-ZIP	HOSFORD FL		3.4. CI	TY-ST	- ZIP				
TITLE	D	DELETE	4.1 TITI					Change	Addition
NAME	RODDENBERRY, STEVE		4. 2 NAM						
STREET ADDRESS	RT 1 BOX 118-K BISTOL FL			STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP TITLE	P	DELETE	4.4 CIT		- ZIP			Change	Addition
NAME	PITTS, DAVID		5.2 NA						
STREET ADDRESS	323 CYPRESS ST.				DDRESS				
CITY-S1-ZIP	BLOUNTSTOWN FL 32424	·	5.4 CIT	Y-ST-	- ZIP				
TITLE	D	DELETE	6.1 7(1)	LE				☐ Change	Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

GILFORD PULLAM

RT 1 BOX 45-5A

HOSFORD FL

4-13-98

FILED

Apr 17 1998 8:00am

Secretary of State