

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *N 3 8 3 0 0*

1. Entity Name

Kinard Sportsman Club, Inc.

FILED

02 JUL 30 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Kinard Sportsman Club

3. Mailing Address

4245 S.W. S.R. 73

Suite, Apt. #, etc.

4245 S.W. S.R. 73

Suite, Apt. #, etc.

4245 S.W. S.R. 73

City & State

Kinard, FL

City & State

Kinard, FL

Zip

32449

Country

USA

Zip

32449

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3130383

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Winston Capps

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

4245 S.W. S.R. 73

City

Kinard

FL

Zip Code

32449

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Winston Capps

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7-25-02

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Winston Capps, President,
Director
4245 S.W. S.R. 73
Kinard, FL 32449*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

*200006880672--6
-08/05/02--01002--018
*****70.00 *****70.00*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Albert (Buddy) Alday, D.V.P.
Rt. 2 Box 293
Aitha, Florida 32421*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Henry J. Nichols, Secretary
Rt. 1 Box 121
Clarksville Florida 32402*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*T. D. Barker D.
Rt. 1 Box 7207
Kinard, FL 32449*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Eugene (Blue) Young D.
P.O. Box 472
Aitha, Florida 32421*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *x Winston Capps*

7-25-02 850-639-5308

CR2E037B (12/01)

7-25-02

To whom it may concern;
This is a re-instatement
for incorporation for
our club. We were un-
aware of the cancellation
last year. Mr. Donnie
Guilott was the secretary
~~before~~ in 2000 and 2001.
He is no longer in the
club so we have
new officers. Please
let me know if I haven't
done this correctly and
let me know if you need
anything else.

Thank you,
Mr. Capps