


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 11, 2006 8:00 am
Secretary of State

09-11-2006 90004 013 ****70.00

DOCUMENT # N38300 1. Entity Name KINARD SPORTSMAN'S CLUB, INC.					
Principal Place of Business 4245 SW SR 73 KINARD, FL 32449			Mailing Address 4245 SW SR 73 KINARD, FL 32449		
2. Principal Place of Business <i>Winston Capps</i> 4245 SW SR 73 Suite, Apt. #, etc.			3. Mailing Address 4245 SW SR 73 Suite, Apt. #, etc.		
City & State Kinard, Florida Zip 32449 Country USA			City & State Kinard Florida Zip 32449 Country USA		
4. FEI Number 59-3130383			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CAPPS, WINSTON 4245 SW SR 73 KINARD, FL 32449			7. Name and Address of New Registered Agent 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 <i>Winston Capps</i> 9-1-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	PD CAPPS, WINSTON 4245 SW SR 73 KINARD, FL 32449	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ALDAY, ALBERT RT 2 BOX 293 ALTA, FL 32421	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SUGGS, PAUL E 14703 SW LIL CIRCLE KINARD, FL 32449	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARKER, TD RT 1 BOX 7707 KINARD, FL 32449	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, EUGENE PO BOX 472 ALTA, FL 32421	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Winston Capps</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				9-1-06 850-639-5308 <small>Date Daytime Phone #</small>	

ATTACHMENT

40.103688

N38300 A
KINARD SPORTSMAN'S CLUB, INC.
4245 SW SR 73
KINARD FL 32449

To whom it may concern;

The reason for the delay in sending the annual report for the incorporation papers: Mr. W. Capps has cancer of the pancreas. He had surgery about a year ago. In January he had a turn for the worse. As you know Pancreatic Cancer is terminal. He has been very ill requiring constant care and we haven't responded to any correspondence with anyone except for doctors and caretakers. March 3, 2006 Mr. Capps entered the nursing home (Blountstown Health and Rehab) I have been staying with him most of the time.

Please consider this reason for our lack of response.

Thank you,
Mrs. Clarice Capps, spouse
of Mr. Winston Capps