


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N42065** (5)
1. Corporation Name
FLORIDA STATE STILL HUNTERS ASSOCIATION, INC.



Principal Place of Business ROUTE 7 BOX 776 LAKE CITY FL 32055	Mailing Address ROUTE 7 BOX 776 LAKE CITY FL 32055
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3. Date Incorporated or Qualified 02/13/1991	
4. FEI Number 59-3049998	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent WARREN, ALVIN E. ROUTE 7 BOX 776 LAKE CITY FL 32055

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	D WHITE, HOWARD
STREET ADDRESS	RT 7 BOX 778 N/A
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	D TUCKER, RT 7 BOX 767 N
STREET ADDRESS	RT 7 BOX 767 N/A
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	D CHRISTIE, NICKY
STREET ADDRESS	RT 7 BOX 722A N/A
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	D ROGERS, W.C.
STREET ADDRESS	RT 7 BOX 768 N/A
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	S HARTLEY, IRWIN N
STREET ADDRESS	RT. 7 BOX 770 N/A
CITY-ST-ZIP	LAKE CITY FL
TITLE	<input type="checkbox"/> DELETE
NAME	T EDMONDS, CLAUDE
STREET ADDRESS	1115 LANE AVE. N
CITY-ST-ZIP	JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Alvin E. Warren* **ALVIN E. WARREN** 3/6/98 444-753-1495

CR2E037 (10/97)