

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42353

FILED
Jan 06, 2009
Secretary of State

Entity Name: SCOUT HUT, INC.

Current Principal Place of Business:

C/O CRAIG O'DELL
12 SHUMARD CT N
HOMOSASSA, FL 34448 US

New Principal Place of Business:

Current Mailing Address:

C/O CRAIG O'DELL
12 SHUMARD CT N
HOMOSASSA, FL 34448 US

New Mailing Address:

FEI Number: 59-3059279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'DELL, PHILLIP CRAIG
12 SHUMARD CT. N
HOMOSASSA, FL 34446 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: O'DELL, CRAIG
Address: 2301 S SUNCOAST BLVD
City-St-Zip: HOMOSASSA, FL 34446

Title: S () Delete
Name: MUNSELL, CINDY
Address: 1085 WEST WIND BREEZE COURT
City-St-Zip: LECANTO, FL 34461

Title: VP () Delete
Name: LEEPER, PAUL
Address: 2918 W ESCRAM CIR LANE
City-St-Zip: LECANTO, FL 33429

Title: D () Delete
Name: CLIMER, KENNETH R
Address: 4570 S. LEISURE BLVD.
City-St-Zip: LECANTO, FL 34461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ADAMS, MIKE
Address: 6959 W VAN BUREN DR.
City-St-Zip: HOMOSASSA, FL 34448

Title: VP (X) Change () Addition
Name: FREUND, ANDY J
Address: 1601 SE 8TH AVE.
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILLIP CRAIG O'DELL

P

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date