


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # N43505

1. Entity Name
 ROCKY CREEK STALK AND STILL HUNTING CLUB, INC.



Principal Place of Business C/O ARGENT K. HARE 6350 ARTHUR BROWN RD. WALNUT HILL, FL 32568	Mailing Address C/O ARGENT K. HARE 6350 ARTHUR BROWN RD. WALNUT HILL, FL 32568
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01242008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3109287	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARE, ARGENT K.
 6350 ARTHUR BROWN RD.
 WALNUT HILL, FL 32568

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

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROY, JERRY 795 CEDAR TREE LANE CANTONMENT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRATLEY, L. RICKY 3430 PINE BARRON ROAD MC DAVID, FL 32568
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARE, ARGENT K 6350 ARTHUR BROWN RD. WALNUT HILL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HARE, HERBERT 6271 ARTHUR BROWN ROAD WALNUT HILL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HARE, JEFFREY A 6350 ARTHUR BROWN ROAD WALNUT HILL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000820478
 02/18/08-80030-016 61.25

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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: Argent K. Hare Date: Feb 6-08 Daytime Phone #: 1-850-327-4536

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR