# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 07, 2008**
**Secretary of State**

DOCUMENT# N48824

**Entity Name:** SAMSULA HUNT CLUB, INCORPORATED

**Current Principal Place of Business:**

989 HUNTING CAMP ROAD
SAMSULA, FL 32168

**New Principal Place of Business:**

989 HUNTING CAMP ROAD
SAMSULA, FL 32168 US

**Current Mailing Address:**

P O BOX 383
EDGEWATER, FL 32132

**New Mailing Address:**

P O BOX 383
EDGEWATER, FL 32132 US

**FEI Number: 59-3126701** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALL, DAVID K
2750 S. RIDGEWOOD AVE
EDGEWATER, FL 32132 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: | BENEDICT, GEORGE | |
| Address: | 3605 DARBY RD | |
| City-St-Zip: | NEW SMYRNA BEACH, FL | |
| Title: | V | ( ) Delete |
| Name: | HAFNER, ERNIE | |
| Address: | 469 N SAMSULA DR | |
| City-St-Zip: | NEW SMYRNA BEACH, FL 32168 | |
| Title: | ST | ( ) Delete |
| Name: | HALL, DAVID K | |
| Address: | 2750 S. RIDGEWOOD AVE | |
| City-St-Zip: | EDGEWATER, FL | |
| Title: | D | ( ) Delete |
| Name: | SAPP, JACK | |
| Address: | 260 TIMBERLANE DR | |
| City-St-Zip: | NEW SMYRNA BEACH, FL 32168 | |
| Title: | D | ( ) Delete |
| Name: | BENEDICT, CLAY | |
| Address: | 705 AIRPORT RD | |
| City-St-Zip: | NEW SMYRNA BEACH, FL 32168 | |
| Title: | D | ( ) Delete |
| Name: | JONES, GENE | |
| Address: | 3051 PIONEER TR | |
| City-St-Zip: | NEW SMYRNA BEACH, FL 32168 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| 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: DAVID K HALL ST 04/07/2008

Electronic Signature of Signing Officer or Director — Date