

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50044

1. Entity Name

PIN HOOK WILDLIFE MANAGEMENT, INC.

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90007 021 ****61.25

Principal Place of Business

Mailing Address

4901 DOBSON ROAD
JAY FL 32565
US

4901 DOBSON ROAD
JAY FL 32565-3005
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3194268

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JORDAN, BILLY
4901 DOBSON ROAD
JAY FL 32565

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD
NAME FINLEY, BURLIN
STREET ADDRESS ROUTE 1, BOX 80
CITY-ST-ZIP JAY FL ☒ Delete

TITLE PD
NAME HENDRICKS, BRENT
STREET ADDRESS RT 1 BOX 101
CITY-ST-ZIP JACKSONVILLE FL ☒ Delete

TITLE STD
NAME JORDAN, BILLY
STREET ADDRESS 4901 DOBSON ROAD
CITY-ST-ZIP JAY FL 32565 ☐ Delete

TITLE D
NAME POLK, WAYNE
STREET ADDRESS 1820 BROWNSDALE LOOP RD
CITY-ST-ZIP JAY FL 32565 ☒ Delete

TITLE D
NAME LASSITER, JESSE
STREET ADDRESS 9667 HWY. 89 N
CITY-ST-ZIP JAY FL ☐ Delete

TITLE D
NAME GOLDEN, DANIEL
STREET ADDRESS ROUTE 1, BOX 396
CITY-ST-ZIP JAY FL ☐ Delete

TITLE VPD
NAME MICHAEL Nowling
STREET ADDRESS 3150 Bud Diamond Rd
CITY-ST-ZIP JAY, FLA, 32565 ☒ Change ☐ Addition

TITLE PD
NAME Brent Jordan
STREET ADDRESS 4901 DOBSON Rd.
CITY-ST-ZIP JAY, FLA, 32565 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME Elton Nowling
STREET ADDRESS 3150 Bud Diamond Rd.
CITY-ST-ZIP JAY, FLA, 32565 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 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: *Billy Jordan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-00 860-675-6662

Date

Daytime Phone #