

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50044

1. Entity Name

PIN HOOK WILDLIFE MANAGEMENT, INC.

FILED

Feb 26, 2002 8:00 am  
Secretary of State

02-26-2002 90038 038 \*\*\*\*61.25

Principal Place of Business

Mailing Address

4901 DOBSON ROAD  
JAY FL 32565  
US

4901 DOBSON ROAD  
JAY FL 32565  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3194268

Applied For

Not Applicable

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

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 NOWLING, MICHEAL  
STREET ADDRESS 3150 BLVD DIAMOND RD  
CITY-ST-ZIP JAY FL 32565 ☐ Delete

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

TITLE PD  
NAME JORDAN, BRENT  
STREET ADDRESS 4901 DODSON RD  
CITY-ST-ZIP JAY FL 32565 ☐ Delete

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

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

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

TITLE D  
NAME NOWLING, ELTON  
STREET ADDRESS 3150 BLVD DIAMOND RD  
CITY-ST-ZIP JAY FL 32565 ☐ Delete

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

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

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

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

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

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* BILLY JORDAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-02 850-675-6562

Date

Daytime Phone #

CR2E037 (9/01)