AMENDED

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
09-09-2003 90028 003 ****61.25
N50425

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N50425

1. Entity Name
FLORIDA HOUND HUNTERS ASSOCIATION, INCORPORATED

Principal Place of Business	Mailing Address
P.O. BOX 638 ALTOONA, FL 32702	P.O. BOX 638 ALTOONA, FL 32702

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

X CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3135704 ☐ 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
JONES, GAYLE 42200 HAWKINS RD. ALTOONA, FL 32702	Name: John Lorton Street Address (P.O. Box Number is Not Acceptable): 14912 Pinecrest Road City: Tampa **FL** Zip Code: 33613

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: [signature] John Lorton, President 9/7/03
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Initial or Amended UBR

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

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP LORTON, JOHN 312 PRUETT RD SEFFNER, FL 33584	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Lorton, John 14912 Pinecrest Road Tampa, FL 33613	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EDENFELD, TERRY 10192 CR 314 SILVER SPRINGS, FL 34488	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Tucker, Bobby J. 4425 SE 69th Street Ocala, FL 34480	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD TUCKES, BOBBY 4425 SE 59ST OCALA, FL 34480	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Edenfield, Terry G 10191 CR 314 Silver Springs, FL 34488	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TUCKER, TONY 1406 W HIAWATHA ST TAMPA, FL 33604	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Hunter, Carla 104 W. Alva Street Tampa, FL 33603	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JONES, GAYLE 42200 HAWKINS RD. ALTOONA, FL 32702	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Wilson, Jimmie E. 4310 SE 183rd Ave. Rd. Ocklawaha, FL 32179	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JONES, GAYLE 42200 HAWKINS RD. ALTOONA, FL 32702	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ellis, Joe 1002 E. Reynolds Street Plant City, FL 33566	☐ Change ☒ Addition

CR2E037 (10/02)

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: [signature] VP Bobby J. Tucker 9/7-03 Cell 352-266-5349
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #