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NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

4535 AMBLEWOOD CT

PACE FL 32571

N93000004086 (5)

Mailing Address
P. O. BOX 1022

PENSACOLA FL 32595-1022

THE SAND LANDING HUNTING CLUB, INC.

05		00					3. Date incorporated or Qualified 09/09/1993		e of Last Re 02/21/19		
2. Principal Pla	ace of Business	2a. Mailing	2a. Mailing Address			-	4. FEI Number 59-3200437	Applied For Not Applicable			
Suite, Apt. 4	♥, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	₽	\$8.75 A	dditional	
City & State	1		City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Ζιρ	Country	Zip		Countr	ry		8. This corporation has liability for i		ax under s.		
24	25 9. Name and Address of Curren	29 Registered Ac					Florida Statutes Yes No 10. Name and Address of New Registered Agent				
HARRISON, GARY 4535 AMBLEWOOD CT PACE FL 32571					2	Name Street Address (P.O. Box Number is Not Acceptable)					
					3						
				84	4	City		FL	85 Zip (ode	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE _	Signature, typed or printed name of registered age	nt and title if applicable	. (NOT	E: Registered A	gent	signature requir	ed when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	\$ IN 12	
TITLE	PD		DELETE	1.1 TITLE					Change	☐ Addition	
NAME	MASON, SCOTT			1.2 NAME	E					İ	
STREET ADDRESS	STREET ADDRESS 3720 PINE FOREST ROAD				1.3 STREET ADDRESS					l	
CITY-ST-ZIP	CANTONMENT FL			1.4 CITY-	-ST-	ZIP					
TITLE	VD .		DELETE	2.1 TITLE	:				Change	Addition	
NAME	STOVER, HARRY			2.2 NAME	E	<u> </u>				· ·	
STREET ADDRESS	2152 PARKER RD			2.3 STREE		ndress				İ	
CITY-ST-ZIP	CANTONMENT FL			2.4 CITY							
TITLE	STD		DELETE	3.1 TITLE		- 4.11			Change	Addition	
NAME	HARRISON, GARY	•		3.2 NAME					g_		
	•				-	DDDEEC					
STREET ADDRESS	1000 1000			3.3 STREE		- 1		-		1	
CITY-SI-ZIP	PACE FL 32571		DELETE	3.4. CITY 4.1 TITLE		-2117			Change	Addition	
TITLE		L.	DELETE			İ	,		(***) Austrille		
NAME				4. 2 NAM							
STREET ADDRESS				4.3 STREE							
CITY-ST-ZIP			LDELETE	4.4 CITY		ZIP	I .		Change	Addion	
TITLE			DELETE	5.1 TITLE					L Change	☐ Addition	
NAME				5.2 NAME	E						
STREET ADDRESS				5.3 STREE	ET A	DDRESS					
CITY-ST-ZIP				5.4 CITY -	******	ZIP			-		
TITLE		[DELETE	6.1 TITLE	Ε				Change	Addition Addition	
NAME				6.2 NAME	Ε	į					
STREET ADDRESS				6.3 STRE	ET A	DORESS					
CITY-ST-ZIP				6.4 CITY-				************			
information I am an of	n indicated on this annual report or s	upplemental and the receiver or t	nual report is t rustee empoy	true and acc vered to exe	cur	ate and that	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega rt as required by Chapter 617, Florida S	l effect as	if made und	der oath; that	