


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000002348 1. Entity Name CLEAR BRANCH HUNTING CLUB, INC.	
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Principal Place of Business 5255 FOX HUNTER LN JAY, FL 32565	Mailing Address 5255 FOX HUNTER LN JAY, FL 32565
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04122005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3367458	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required

6. Name and Address of Current Registered Agent PRESCOTT, HAYWARD 5255 FOX HUNTER LANE JAY, FL 32565

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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 _____ (NOTE: Registered Agent signature required when rehashing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D J.L. MILLER SR. 3208 SAMANTHA DR. CANTONMENT, FL 32533
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FARRISH, STEVE 8 BOB SIKES BLVD. JAY, FL 32565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES W CARNLEY P.O. BOX 783 CANTONMENT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LARRY MANTEL HC 34 BOX 187-A EVERGREEN, AL 36401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRESCOTT, HAYWARD 5255 FOX HUNTER LANE JAY, FL 32565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>000000307355 04/15/05-80054-001 61.25</p> <p>DO NOT WRITE IN THIS SPACE</p>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: HAYWARD PRESCOTT Hayward Prescott 4-12-05 850 675 4733
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #