

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

DOCUMENT # N94000002738

1. Entity Name
CHOCTAWHATCHEE CREEK INDIAN NATION INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 APR 25 PM 2:55



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business
7313 BIRCHWOOD ROAD
GRAND RIDGE FL 32442-3761

Mailing Address
7313 BIRCHWOOD ROAD
GRAND RIDGE FL 32442-3761

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3256226

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

HOOD, EARL
7313 BIRCHWOOD ROAD
GRAND RIDGE FL 32442-3761

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Earl Hood

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

(NOTE: Registered Agent signature required when reinstating)

DATE 4/25/03

FILE NOW: FEE IS \$61.25

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	HOOD, EARL	
STREET ADDRESS	7313 BIRCHWOOD ROAD	
CITY - ST - ZIP	GRAND RIDGE FL 32442-3761	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HOOD, CATHIE	
STREET ADDRESS	RT 1, BOX 50-A	
CITY - ST - ZIP	ARITON AL 36311	
TITLE	TD	<input type="checkbox"/> Delete
NAME	COULLETTE, BONNIE	
STREET ADDRESS	2082 CORBIN ROAD	
CITY - ST - ZIP	COTTONDALE FL 32431	
TITLE	S	<input type="checkbox"/> Delete
NAME	NORDES, PATRICIA	
STREET ADDRESS	1270 SPIVEY ROAD	
CITY - ST - ZIP	GRAND RIDGE FL 32442	
TITLE	D	<input type="checkbox"/> Delete
NAME	DEATON, JOHN	
STREET ADDRESS	8110 HAWLEY STREET	
CITY - ST - ZIP	SNEADS FL 32460	
TITLE	D	<input type="checkbox"/> Delete
NAME	HARRISON, WALTER H	
STREET ADDRESS	7766 WOODLAWN DRIVE	
CITY - ST - ZIP	SNEADS FL 32460	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	500018471235
CITY - ST - ZIP	05/07/03--01124--024 **70.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
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:

Earl Hood