


**FILED**  
**Mar 08, 2006 8:00 am**  
**Secretary of State**

<h1 style="margin: 0;">DOCUMENT # N94000003519</h1>		
<b>1. Entity Name</b> BIG CREEK HUNTING CLUB, INC.		
<b>Principal Place of Business</b> 6949 MOBILE HIGHWAY PENSACOLA, FL 32526		<b>Mailing Address</b> P O BOX 37159 PENSACOLA, FL 32526    US
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip      Country
<b>6. Name and Address of Current Registered Agent</b>		
WHITE, JAMES H SR 6949 MOBILE HIGHWAY PENSACOLA, FL 32526		Name
		Street Address
		City
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.</b>		
<b>SIGNATURE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>		
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>
<b>10. OFFICERS AND DIRECTORS</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D WHITE, JAMES H SR 590 LANDERS ST CANTONMENT, FL 32533 <input type="checkbox"/> Delete	<b>11.</b>
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D WALLACE, ROGER 910 E CERVANTES PENSACOLA, FL 32501 <input checked="" type="checkbox"/> Delete	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	D WHITE, JAMES H JR 2070 DOVEFIELD DR PENSACOLA, FL 32534 <input type="checkbox"/> Delete	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in this report or supplemental report is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 61, F.S., changed, or on an attachment with an address, with all other like empowered.</b>		
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		James H White