## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N9400004423 (9)

**ODOM POND HUNTING CLUB, INCORPORATED** 

Principal Place of Business Mailing Address

## **FILED** Jun 18 1997 8:00am Secretary of State



RT 1 BOX 42-D-3 FREEPORT FL 32455				RT 1 BOX 42-D-3 FREEPORT FL 32455-9801									
								<ol> <li>Date Incorporated or Qualified 09/06/1994</li> </ol>		of Last R			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number NOT APPLICABLE	•	Ar	oplied For		
21				26				NOT APPLICABLE			ot Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional equired		
City & State				City & State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees		
Zip 24	Country 25			Zip Coun			/	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes					
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
						81	Name						
MORRISON, TILTON RT 1-50X 42-D-3							Street	treet Address (P.O. Box Number is Not Acceptable)					
FREEPORT FL 32455													
4						84	City		FL	<b>85</b> Zip	Code		
office or r	registered ag	ons of Sections 617.0502 ent, or both, in the State of th, and accept the obliga	of Flori	ida. Such change was	authorize	ıd bı	v the core	corporation submits this statement for the p poration's board of directors. I hereby accep	urpose of c of the appoi	hanging i ntment as	ts registered registered		
SIGNATURE	rtl.C	or printed harne of registered ager						e regulred when reinstating)	-00-5	17_			
12.	Signature, typeo	OFFICERS AND	_	,,	13.		ork organization	ADDITIONS/CHANGES TO OFFIC			3S IN 12		
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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.