

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

May 24, 2000 8:00 am  
Secretary of State

05-24-2000 90061 010 \*\*\*\*70.00

DOCUMENT # N94000004840

1. Entity Name

CLEAR CREEK HUNTING CLUB, INC.

Principal Place of Business

Mailing Address

3056 APACHE DR.  
PACE FL 32571  
US

3056 APACHE DR.  
PACE FL 32571-9602  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

Zip  
32565

Country  
SAN XA ROYA

Zip  
32565

Country  
SAN XA ROYA

4. FEI Number

59-3275246

Applied For

Not Applicable

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

COTTON, RONALD  
3056 APACHE DR.  
PACE FL 32571

Name  
RONALD G. COTTON

Street Address (P.O. Box Number is Not Acceptable)

13533 CHUMUCKLA HWY 197

JAY, FLA

32565

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.

SIGNATURE

*Ronald G. Cotton*

*Ronald G. Cotton*

5/1/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	COTTON, RONALD G.	
STREET ADDRESS	3056 APACHE DR.	
CITY-ST-ZIP	PACE FL 32571	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	TAYLOR, ALLEN	
STREET ADDRESS	106 PAWNWOOD DR.	
CITY-ST-ZIP	PACE FL 32571	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BONZON, CHRIS	
STREET ADDRESS	107 PAWNWOOD DR.	
CITY-ST-ZIP	PACE FL 32571	
TITLE	D	<input type="checkbox"/> Delete
NAME	JORDAN, CARL	
STREET ADDRESS	6304 WISTERIA DR.	
CITY-ST-ZIP	MILTON FL 32570	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARY MANN	
STREET ADDRESS	2899 FOR POND RD.	
CITY-ST-ZIP	MILTON, FLA 32571	
TITLE	BOARD OF DIRECTORS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEAN COTTON	
STREET ADDRESS	8685 CHUMUCKLA HWY	
CITY-ST-ZIP	PACE, FLA 32571	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	BOARD OF DIRECTORS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROYER CAMPBELL	
STREET ADDRESS	8797 GIN RD.	
CITY-ST-ZIP	PACE, FLA 32571	
TITLE	BOARD OF DIRECTORS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICKY CAMPBELL	
STREET ADDRESS	8800 GIN ROAD.	
CITY-ST-ZIP	PACE, FLA 32571	

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:

*Ronald G. Cotton*

5/1/00 850-675-0300

CR2E037 (9/99)