

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90935 018 ****70.00

0019154

DOCUMENT # N94000004840

1. Entity Name

CLEAR CREEK HUNTING CLUB, INC.

Principal Place of Business

13533 CHUMUCKIA HWY 197
 JAY FL 32565
 US

Mailing Address

13533 CHUMUCKIA HWY 197
 JAY FL 32565
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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
13533 CHUMUCKIA HWY 197
JAY FL 32565

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.

SIGNATURE

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	V	<input type="checkbox"/> Delete
NAME	VIANN, MARY	
STREET ADDRESS	2899 FOX POND RD	
CITY-ST-ZIP	MILTON FL 32571	
TITLE	BOD	<input type="checkbox"/> Delete
NAME	COTTON, JEFF	
STREET ADDRESS	8685 CHUMUCKIA HWY	
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	BOD	<input type="checkbox"/> Delete
NAME	CAMPBELL, ROGER	
STREET ADDRESS	8597 GRIN RD	
CITY-ST-ZIP	PACE FL 32571	
TITLE	BOD	<input type="checkbox"/> Delete
NAME	CAMPBELL, RICKY	
STREET ADDRESS	8800 GRIN RD	
CITY-ST-ZIP	PACE FL 32571	

TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cotton, Ronald G.	
STREET ADDRESS	13533 CHUMUCKIA HWY 197	
CITY-ST-ZIP	JAY, FLA 32565	
TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jordan, Carl	
STREET ADDRESS	8304 WISTERIA DR.	
CITY-ST-ZIP	MILTON, FLA 32570	
TITLE	BOD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cotton, Jeff	
STREET ADDRESS	8685 CHUMUCKIA HWY	
CITY-ST-ZIP	PACE, FLA 32571	
TITLE	BOD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Campbell, Ricky	
STREET ADDRESS	8800 GRIN RD.	
CITY-ST-ZIP	PACE, FLA 32571	
TITLE	BOD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Arthur, Kenny	
STREET ADDRESS	6049 W. Cambridge Way	
CITY-ST-ZIP	PACE, FLA 32571	
TITLE	BOD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHTON, MICHAEL	
STREET ADDRESS	5224 OAK DRIVE	
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 19.07(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
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01

Date

Daytime Phone #

250-675-0300

CR2E037 (10/00)