


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 22, 2006 08:00 A**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # N94000006307</b><br>1. Entity Name<br>MILL HUNTING CLUB, INC. |  |
|---|---|

|  |  |
|--|--|
| Principal Place of Business<br>HIGHWAY 71 NORTH<br>BLOUNTSTOWN, FL 32424 | Mailing Address<br>PO BOX 189<br>BLOUNTSTOWN, FL 32424 |
|--|--|



03012006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

|  |                               |
|--|-------------------------------|
| 4. FEI Number<br>59-3379126  | Applied For<br>Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |                               |

|   |
|---|
| 6. Name and Address of Current Registered Agent<br><br>ROGERS, HARRY W<br>HIGHWAY 71 NORTH<br>BLOUNTSTOWN, FL 32424 |
|---|

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

|   |  |   |
|---|--|---|
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2006</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> | 1100000477751<br>04/06/06-90062-020 61.25 |
|---|--|---|

| 10. OFFICERS AND DIRECTORS                     |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>BENNETT, KERBY<br>314 13TH ST<br>BLOUNTSTOWN, FL 32424 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>RIDLEY, JASON<br>HWY 20 WEST<br>BLOUNTSTOWN, FL        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>FLEMING, DAVID<br>HWY 715<br>BLOUNTSTOWN, FL           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>ROGERS, HARRY<br>PO BOX 189<br>BLOUNTSTOWN, FL 32424   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**  **3/21/06** **850 674-5991**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #