## **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 # N9500002328 (1)

## THE 8-POINT HUNTING CLUB, INC.

Principal Place of Business

5905 KENDALL AVE
PENACOLA FI 32506

Mailing Address

5905 KENDALL AVE PENSACOLA FL 32506-526

## FILED Mar 10 1997 8:00am Secretary of State



PENSACOLA FL	32506	PENSACOLA FL 32506-5262				
						3. Date incorporated or Qualified 05/12/1995 3a. Date of Last Report 05/23/1996
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For 59-3371426 Net Applied For
21 26						Hot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22						5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City & State						6. Election Campaign Financing \$5,00 May Be
23		28				Trust Fund Contribution
Ζφ	Country	Zıp	Co	ountry		This corporation has fiability for intangible tax under s. 199.032,
24	25	29	30			Florida Statutes Yes 12 No
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered Agent
				וסו	IVAITIE	
ANDERSON, ALLEN 5905 KENDALL AVE				62	Street A	Address (P.O. Box Number is Not Acceptable)
	NUALL AVE OLA FL 32506					
PENSAU	OLA PL 32300			83	0	
				84	City	FL  85   Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE _						ļ
12.	Signature, typed or printed name of registered ager OFFICERS AND		E: Registe		eni signature	required when relinstating)  OATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE		TITLE	T	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	ANDERSON, ALLEN	<del></del>		NAME		I.
STREET ADDRESS	5905 KENDALL AVE		1.3	STREET	ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32506		14	CITY-5	ST-ZIP	
TITLE	D	DELETE	2.1	TITLE		☐ Change ☐ Addition
NAME	ANDERSON, DIANE		2.2	NAME		
STREET ADDRESS	5905 KENDALL AVE		2.3	STREET	ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32506			CITY-	ST-ZIP	
TITLE	VD	DELETE		TITLE		Change Addition
NAME CIRCET ADDRESS	HALL, RAY 2000 W CAIRO ST			NAME	. 4000000	
STREET ADDRESS CITY-ST-ZIP	PENSACOLA FL 32507				T ADDRESS	İ
TITLE	STD	DELETE		CITY-	31-21	Change Addition
NAME	MARTIN, KATE	<u> </u>		NAME		
STREET ADDRESS	3661 SCOGGINS ST		4,3	STREET	T ADDRESS	
CITY-ST-ZIP	PACE FL 32571		4.4	CITY-S	ST-ZIP	
TITLE		☐ DELETE	5.1	TITLE		☐ Change ☐ Addition
NAME			5.2	NAME		
STREET ADDRESS			5.3	STREET	T ADDRESS	
CITY-ST-ZIP				CITY-S	51 - ZIP	
TITLE		☐ DELETE		TITLE		☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS					T ADDRESS	·
CITY-ST-ZIP 14. I do hereb	by certify that the information supplied	I with this filing does not qual		CITY-S		tated In Section 119.07(3)(i), Florida Statutes. I further certify that the

14. I do hereby certify that the information supplied with this filing does not quality 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.

SIGNATURE:

allo and the prow to deson

3-2-97

904-456-8370