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

**NONPROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #
1. Corporation Name

N95000003153 (2)

CLAY HILL HUNTING CLUB, INC.

Brigging Plac	on of Puriosen	Mailing Address				
Principal Place of Business  1568 LOUIE CARTER RD  JACKSONVILLE FL 32234  US  P.O. BOX 144  MIDDLEBURG FL 320500  US						
		MIDDLEBURG FL 320504	X144			
		US		3. Date incorporated or Qualified 06/30/1995	3a. Date of Last Report 04/24/1996	
Principal Place of Business     2a. Mailing Address				4. FEI Number	Applied For	
21 26				59-3287149	Not Applicable	
		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
22			City & State		6. Election Campaign Financing	
—¬ ′ ⊢		<b>⊢</b> .	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30			Yes No
	9. Name and Address of Curre	nt Registered Agent	81		10. Name and Address of New Ro	egistered Agent
			[8]	Name		
PERSONS, ROBERT B JR.			82	Street Add	fress (P.O. Box Number is Not Accepta	ole)
2215 SOUTH THIRD STREET			83			
	SUITE 101 JACKSONVILLE BEACH FL 32250			·		
UNUNU	JACKSONVILLE BEACH FL 32230			City	•	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered ac	ND DIRECTORS	OTE: Registered Agent	signature requ	ared when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
TITLE	D	PELETE	1.1 TITLE		Trace Octob	Change X Addition
NAME	CARTER, LOUIE		1.2 NAME		Hobbs, Richard 143 old Canfor Rd Jacksonville FL 322	
STREET ADDRESS	6090 OLD CARTER ROAD		1.3 STREET A	DORESS 6	lankson wille FL 322	34
CITY-S1-ZIP TITLE	JACKSONVILLE FL 32234	DELETE	1.4 CITY-ST- 2.1 TITUE	ZIP	stologous the time of	Change Addition
NAME	CARTER, JAMES	- Joseph	2.2 NAME	1		La Change Last (40000)
STREET ADDRESS	5780 CR 218		2.3 STREET A	DDRESS		•
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-ST	- ZIP		
TITLE	V	DELETE	3.1 TITLE			Change Addition
NAME	HARVEY, ARNOLD		3.2 NAME	]		
STREFT ADDRESS	1568 LOUIE CARTER RD		3.3 STREET A			
CITY-ST-ZIP TITLE	JACKSONVILLE FL	DELETE	3.4. CITY-ST 4.1 TITLE	- ZIP		Change Addition
NAME	WALLACE, DAVID	La succit	4. 2 NAME	1		The standage of the standage of
STREET ADDRESS	• • • • • •					
CITY-ST-ZIP	1108 RICHARD LANG ROAD	)		DORESS		
TITLE	1108 RICHARD LANG ROAD JACKSONVILLE FL 32234	)	4.3 STREET A			
	JACKSONVILLE FL 32234 D	DELETE	4.3 STREET A			☐ Change ☐ Addition
NAME	JACKSONVILLE FL 32234 D ALEXANDER, LEON		4.3 STREET A 4.4 City-St-			Change Addition
	JACKSONVILLE FL 32234 D ALEXANDER, LEON 1535 FLOYD JOHNS RD		4.3 STREET A 4.4 City-St- 5.1 Title	ZIP		☐ Change ☐ Addition
NAME STREET AODRESS CHTY-ST-ZIP	JACKSONVILLE FL 32234 D ALEXANDER, LEON	☐ DELETE	4.3 STREET A 4.4 City-St. 5.1 Title 5.2 Name 5.3 Street A 5.4 City-St.	ZIP DORESS		- •
NAME STREET AODRESS	JACKSONVILLE FL 32234 D ALEXANDER, LEON 1535 FLOYD JOHNS RD		4.3 STREET A 4.4 CITY-ST- 5.1 TITLE 5.2 NAME 5.3 STREET A	ZIP DORESS		Change Addition

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

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 the 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.

**FILED** 

May 08 1997 8:00am

Secretary of State