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 # N95000003572 (3)

HAMMOCK BRANCH HUNTING CLUB, INCORPORATED

Country

9. Name and Address of Current Registered Agent

Principal Place of Business	Mailing Address			
1012 VIRGINIA COURT PANAMA CITY FL 32404	1012 VIRGINIA COURT PANAMA CITY FL 32404-2353			
2. Principal Place of Business	2a. Mailing Address			
Suite. Apt. #. etc.	Suite Apl # etc			

28

29

City & State

Zip

4. FEI Number Applied For 59-3328218 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Yes Yes Florida Statutes

FILED

Jun 12 1997 8:00am

Secretary of State

3a. Date of Last Report

04/17/1996

STEWART, J	AMES B
1012 VIRGIN	IA COURT
PANAMA CIT	ry fl 32404

City & State

23

24

Zip

	10. Name and Address of New Registered Agent							
	B1	Name Bryan K. Walters						
	62	Street Address (P.O. Box Number is Not Acceptable)						
	83	5313 Indian Blufp dr.						
ĺ	84	City Journal Dur FI 85 Zip Code						

3. Date Incorporated or Qualified

07/25/1995

Country

30

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, if an accept the obligations of, Section 617.0503. Florida Statutes.									
12 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1									
SIGNATURE Signature, Visid or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND DIRE	CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PD	X DELETE	1.1 TITLE	PD Addition					
NAME	STEWART, JAMES,B,		1.2 NAME	Walters Digan K					
STREET ADDRESS	1012 VIRGINIA CT		1.3 STREET ADDRESS	By walters Bryan K Achange Addition 5313 Indian Blupp dr.					
CITY-ST-ZIP	PANAMA CITY FL		1.4 CITY-ST-ZIP	Youngstown Fl. 32466					
TITLE	VD	₩ DELETE	2.1 TITLE	Change Addition					
NAME	BERLING, R J		2.2 NAME	Misman Charles C					
STREET ADDRESS	2127 SHAMROCK LN		2.3 STREET ADDRESS	120 000 1264 2014 Geralo Line 1					
CITY-ST-ZIP	LYNN HAVEN FL		2. 4 CITY - ST - ZIP	Lynn Haven FI Lynn Haven F1.32444					
TITLE	STD	DELETE	3.1 TITLE	STD PChange Addition					
NAME	HISMAN, CHARLES C	,	3.2 NAME	[• 1 • 1 • 1 • 1 • 1 • 1 • 1 • 1 • 1 •					
STREET ADDRESS	PO BOX 1264		3.3 STREET ADDRESS	P.C. 32402 Lynn Haven F1. 32444					
CITY-ST-ZIP	LYNN HAVEN FL		3.4. CITY+ ST - ZIP	P.C. 32402 Lynn Haven F1, 32444					
TITLE		☐ DELETE	4.1 TITLE	Change Addition					
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP	<u> </u>					
TITLE		DELETE	5.1 TITLE	Change Addition					
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY-ST-2IP						
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition					
NAME			6.2 NAME]					
STREET ADDRESS			6.3 STREET ADDRESS						
SUED / 62 316			D 4 O/T/4 OT T/O	1					

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 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.