

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N95000003785

1. Entity Name
BULL CREEK HUNTING & FISHING CLUB, INC.



Principal Place of Business

1001 US 1
604

JUPITER, FL 33477 US

Mailing Address

1001 US 1
604

JUPITER, FL 33477 US



01072008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0637136

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCALL, WALLACE B.
1001 US 1
SUITE 604
JUPITER, FL 33477

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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

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME MCCALL, WALLACE B
STREET ADDRESS 1001 US HWY 1 STE 604
CITY-ST-ZIP JUPITER, FL 33477

TITLE D
NAME FERGUSON, THOMAS C
STREET ADDRESS 202 WESTMINSTER RD
CITY-ST-ZIP WEST PALM BEACH, FL 33405

TITLE D
NAME BLAKE, GLEN
STREET ADDRESS P.O. BOX 3269
CITY-ST-ZIP FT PIERCE, FL 34948

TITLE D
NAME FERGUSON, THOMAS C JR
STREET ADDRESS 188 DUKE DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/22/08 (86) 746-7073