


FILE NOW: FILING FEE IS \$61.25

FILED

Jul 07 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT #** **1.** Corporation Name **N960000004722**  
*Main Bay Hunting Club, Inc.*

Principal Place of Business **RT. 1 Box 830**  
**Madison, FL 32340**

Mailing Address **RT. 1 Box 830**  
**Madison, FL 32340**

<b>2.</b> Principal Place of Business	<b>2a.</b> Mailing Address
<b>21</b> Suite, Apt. #, etc.	<b>26</b> Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country
<b>25</b>	<b>30</b>

**3.** Date Incorporated or Qualified

**4.** FEI Number **59-346-7041** Applied For ☐ Not Applicable ☐

**5.** Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6.** Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

**7.** Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

**8.** This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

**9. Name and Address of Current Registered Agent**

*Thomas G. Bass*  
*RT. 1 Box 830*  
*Madison, FL 32340*

**10. Name and Address of New Registered Agent**

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

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

**12. OFFICERS AND DIRECTORS**

<b>TITLE</b>	<b>NAME</b>	<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE
	<i>President</i>	<i>Thomas F. Bass</i>	<i>RT. 1 Box 830</i>	
		<i>Madison, FL 32340</i>		
<b>TITLE</b>	<b>NAME</b>	<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE
	<i>Sec.</i>	<i>Debra D. Bass</i>	<i>RT. 1 Box 830</i>	
		<i>Madison, FL 32340</i>		
<b>TITLE</b>	<b>NAME</b>	<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE
	<i>Vice Pres.</i>	<i>Ed Straka</i>	<i>RT. 4 Box 463</i>	
		<i>Perry, FL 32347</i>		
<b>TITLE</b>	<b>NAME</b>	<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE
<b>TITLE</b>	<b>NAME</b>	<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>	<input type="checkbox"/> DELETE

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>1.1 TITLE</b>	<b>1.2 NAME</b>	<b>1.3 STREET ADDRESS</b>	<b>1.4 CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<i>(T) Billy Richardson</i>	<i>RT. 2 Box 1338</i>	<i>Madison, FL 32340</i>	
<b>2.1 TITLE</b>	<b>2.2 NAME</b>	<b>2.3 STREET ADDRESS</b>	<b>2.4 CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<i>(T) Daniel Bass</i>	<i>RT. 1 Box 818</i>	<i>Madison, FL 32340</i>	
<b>3.1 TITLE</b>	<b>3.2 NAME</b>	<b>3.3 STREET ADDRESS</b>	<b>3.4 CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<i>(T) Donald Bass</i>	<i>RT. 1 Box 830</i>	<i>Madison, FL 32340</i>	
<b>4.1 TITLE</b>	<b>4.2 NAME</b>	<b>4.3 STREET ADDRESS</b>	<b>4.4 CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>5.1 TITLE</b>	<b>5.2 NAME</b>	<b>5.3 STREET ADDRESS</b>	<b>5.4 CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>6.1 TITLE</b>	<b>6.2 NAME</b>	<b>6.3 STREET ADDRESS</b>	<b>6.4 CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**14.** I 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.

**SIGNATURE:** *Thomas F. Bass* *Thomas F. Bass* *6-29-98* *973-4336*

CR2E037 (10/97)