## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # N97000002986**

1. Entity Name

POND FORK SPORTSMAN HUNTING CLUB, INC.



03-05-2007 90072 004 \*\*\*\*70.00

**FILED** 

Mar 05, 2007 8:00 am Secretary of State

Principal Place of Business

7951 PINE FOREST ROAD WALNUT HILL, FL. 32568

Mailing Address

7951 PINE FOREST ROAD WALNUT HILL, FL 32568



02212007 No Chg-NP

CR2E037 (4/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GIBSON, MERVIN 7951-PINE FOREST-ROAD -- -- WALNUT HILL, FL 32568 DO NOT WRITE IN THIS SPACE

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			t signature required when reinstating)	netsting) DATE	
·	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GIBSON, MERVIN 7951 PINE FOREST ROAD WALNUT HILL, FL 32568				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HASSELL, B.T. 3131 S. PINEVILLE RD. WALNUT HILL, FL 32588				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GREESON, WILLIAM H 617 ORBY STREET PENSACOLA, FL 32534		DO	NOT WRIT	<b>E</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, IN	THIS SPAC	Ē
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	cartify that the information supplied with the		long contributed in Chapter 1	O Charles Statutes I believe	

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

2-21-07

051 477 2821

Data

Devime Phone #