

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002236

FILED
Jul 19, 2007
Secretary of State

Entity Name: CRAPPS TOWER HUNTING CLUB, INC.

Current Principal Place of Business:

935 NE ORCHID RD
BRANFORD, FL 32008

New Principal Place of Business:

Current Mailing Address:

PO BOX 47
MAYO, FL 32066

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BYRD, PAUL
RT 4, BOX 181
BRANFORD, FL 32008 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BYRD, PAUL
Address: 935 NE ORCHID RD
City-St-Zip: BRANFORD, FL 32008

Title: D () Delete
Name: ADAMS, ANTHONY
Address: 921 SE CR 420
City-St-Zip: BRANFORD, FL 32008

Title: D () Delete
Name: KOON, SIDNEY
Address: 1007 NE SHADY OAK DR
City-St-Zip: MAYO, FL 32066

Title: D () Delete
Name: BRYD, J W
Address: 583 NE CR 410
City-St-Zip: MAYO, FL 32066

Title: D () Delete
Name: WALKER, SCOTT
Address: 3058 NE JEFF WALKER RD
City-St-Zip: MAYO, FL 32066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL BYRD

CHMN

07/19/2007

Electronic Signature of Signing Officer or Director

Date