

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002236

FILED  
Apr 27, 2009  
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 ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: ANTHONY ADAMS

D

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date