2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 AM
Secretary of State

DOCUMENT# N98000003875

Entity Name: BELL CREEK WILDLIFE CLUB, INC.

Current Principal Place of Business:

10113 CHUMUCKLA SPRINGS ROAD
JAY, FL 32565

New Principal Place of Business:

Current Mailing Address:

10113 CHUMUCKLA SPRINGS ROAD
JAY, FL 32565

New Mailing Address:

FEI Number: 59-3572828 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRISWOLD, MARTIN (MARTY)
10113 CHUMUCKLA SPRINGS ROAD
JAY, FL 32565

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:	DP	( ) Delete
Name:	GRISWOLD, MARTIN (MARTY)	
Address:	10113 CHUMUCKLA SPRINGS ROAD	
City-St-Zip:	JAY, FL 32565	
Title:	DV	( ) Delete
Name:	THRIFT, WILLIE	
Address:	9880 REBEL ROAD	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	DT	( ) Delete
Name:	GRISWOLD, LAVON	
Address:	2578 HWY 182	
City-St-Zip:	JAY, FL 32565	
Title:	D	( ) Delete
Name:	O'KELLEY, RICKY	
Address:	10111 CHUMUCKLA SPRINGS ROAD	
City-St-Zip:	JAY, FL 32565	
Title:	DS	( ) Delete
Name:	HATFIELD, DOUG	
Address:	2311 HWY 182	
City-St-Zip:	JAY, FL 32565	
Title:	D	( ) Delete
Name:	COZART, DAVID	
Address:	2050 HWY 185	
City-St-Zip:	JAY, FL 32565	

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARTIN D GRISWOLD PRES 05/01/2002
Electronic Signature of Signing Officer or Director — Date