2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007163

FILED Apr 28, 2010 Secretary of State

Entity Name: ANCIENT CITY GAME FISH ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P. O. BOX 2001 6381 PINE CIRCLE W ST. AUGUSTINE, FL 32085 P. O. BOX 2001

ST. AUGUSTINE, FL 32095

Current Mailing Address: New Mailing Address:

6381 PINE CIRCLE W ST. AUGUSTINE, FL 32095

FEI Number: 59-3542839 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BLALOCK, JIM
18 BARCELONA AVE.

ST. AUGUSTINE, FL 32080 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: I

Name: CUNNINGHAM, JOEL
Address: 254 DARTMOUTH RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VP

 Name:
 FRANTZ, DOONNA K

 Address:
 6409 PINE CIRCKE W

 City-St-Zip:
 ST AUGUSTINE, FL 32095

Title: S

Name: BURT, STEPHNIE Address: P O BOX 4273

City-St-Zip: ST AUGUSTINE, FL 32085

Title: T

 Name:
 MANUCY, LINDA W

 Address:
 6381 PINE CIRCLE W

 City-St-Zip:
 ST. AUGUSTINE, FL 32095

Title: [

 Name:
 OLSEN, ROBERT K

 Address:
 7300 DOE RUN RD

 City-St-Zip:
 ST AUGUSTINE, FL 32095

Title: [

 Name:
 CHAPMAN, DAVID

 Address:
 360 SHAMROCK RD

 City-St-Zip:
 ST AUGUSTINE, FL 32086

I hereby 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 all other like empowered.

SIGNATURE: LINDA W. MANUCY T 04/28/2010