2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# N98000007163

Entity Name: ANCIENT CITY GAME FISH ASSOCIATION, INC.

Current Principal Place of Business:

6381 PINE CIRCLE W
P. O. BOX 2001
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

Current Mailing Address:

6381 PINE CIRCLE W
ST. AUGUSTINE, FL 32095

New Mailing Address:

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

Name and Address of Current Registered Agent:

BLALOCK, JIM
18 BARCELONA AVE.
ST. AUGUSTINE, FL 32080 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: P
Name: FRANTZ, DONNA K
Address: 6409 PINE CIRCLE W.
City-St-Zip: ST AUGUSTINE, FL 32095

Title: VP
Name: SHANK, SCOTT
Address: 3236 CALLE BARCELONA
City-St-Zip: ST AUGUSTINE, FL 32086

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: D
Name: OLSEN, ROBERT K
Address: 7300 DOE RUN RD
City-St-Zip: ST AUGUSTINE, FL 32095

Title: D
Name: JONES, TERRELL
Address: 5095 DATIL PEPPER ROAD
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 02/16/2011

Electronic Signature of Signing Officer or Director — Date