

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007174

1. Entity Name

HPS HUNTING CLUB, INC.

Principal Place of Business

815 SHADOW LANE  
FT WALTON BEACH FL 32547

Mailing Address

POST OFFICE BOX 63  
HOLT FL 32564-0063

FILED

00 JAN -6 PM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4553 LOG LAKE ROAD  
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 425  
Suite, Apt. #, etc.

City & State

HOLT, FL

City & State

HOLT, FL

4. FEI Number

59-3549533

Applied For

Not Applicable

Zip

32564

Country

USA

Zip

32564

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fees Required

6. Name and Address of Current Registered Agent

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name Spiegel & Utrera, P.A.

Street Address (P.O. Box Number is Not Acceptable)  
343 Almeria Avenue

City

Coral Gables

FL

Zip Code  
33134

8. 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.

Spiegel & Utrera, P.A.

SIGNATURE

By:

Natalia Utrera, Vice-President

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete

NAME WALKER, JOHNNY L  
STREET ADDRESS 815 SHADOW LANE  
CITY-ST-ZIP FT WALTON BEACH FL 32547

TITLE VD ☐ Delete

NAME HERRIN, ROBERT A  
STREET ADDRESS 815 SHADOW LANE  
CITY-ST-ZIP FT WALTON BEACH FL 32547

TITLE STD ☐ Delete

NAME STUCKEY, ARTHUR L  
STREET ADDRESS 815 SHADOW LANE  
CITY-ST-ZIP FT WALTON BEACH FL 32547

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition

NAME PARKER, JOHNNY L.  
STREET ADDRESS 4555 LOG LAKE RD.  
CITY-ST-ZIP HOLT, FL 32564

TITLE VD ☒ Change ☐ Addition

NAME HERRIN, ROBERT A.  
STREET ADDRESS 4360 COOPER LANE  
CITY-ST-ZIP HOLT, FL 32564

TITLE STD ☒ Change ☐ Addition

NAME STUCKEY, ARTHUR L.  
STREET ADDRESS 4825 CHAPPEL ST.  
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE ☐ Change ☐ Addition

NAME 100003095401--9  
STREET ADDRESS -01/12/00--01006--010  
CITY-ST-ZIP \*\*\*\*\*70.00 \*\*\*\*\*70.00

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOHNNY L. PARKER 01/03/2000 850-537-2011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #