

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005687

FILED
Feb 17, 2004
Secretary of State**Entity Name:** SAND CREEK HUNTING CLUB INC.**Current Principal Place of Business:**2111 WALLACE LAKE ROAD
PACE, FL 32571**New Principal Place of Business:****Current Mailing Address:**2111 WALLACE LAKE ROAD
PACE, FL 32571**New Mailing Address:****FEI Number:** 59-3659925**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JERNIGAN, ERNEST
2111 WALLACE LAKE ROAD
PACE, FL 32571 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:** PD () Delete
Name: JERNIGAN, ERNEST
Address: 2111 WALLACE LAKE ROAD
City-St-Zip: PACE, FL 32571**Title:** VD () Delete
Name: MELVIN, CLAY
Address: 4699 EPHERN LANE
City-St-Zip: PACE, FL 32571**Title:** STD () Delete
Name: TUCKER, BILL
Address: 2679 RENFROE ROAD
City-St-Zip: PACE, FL 32571**Title:** D () Delete
Name: BLANTON, LEWIS
Address: 3261 MELVIN DRIVE
City-St-Zip: PACE, FL 32571**Title:** D () Delete
Name: COLUCCI, JOE
Address: 2893 RENFROE ROAD
City-St-Zip: PACE, FL 32571**Title:** D () Delete
Name: HATFIELD, DOUG
Address: HIGHWAY 182
City-St-Zip: PACE, FL 32571**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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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: BILL TUCKER

STD

02/17/2004

Electronic Signature of Signing Officer or Director

Date