


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000006959 1. Entity Name NATIONAL GARDENS HUNTING CLUB, INC.	
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Principal Place of Business 604 ST. AUGUSTINE SOUTH DR. ST. AUGUSTINE, FL 32086	Mailing Address 604 ST. AUGUSTINE SOUTH DR. ST. AUGUSTINE, FL 32086
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01172005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3619975	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BAGLEY, MICHAEL O 604 ST. AUGUSTINE SOUTH DR. ST. AUGUSTINE, FL 32086
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

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

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLEMAN, J.M. 118 EAST FIRST ST. CALLAHAN, FL 32011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COLEMAN, J.M. JR. 118 EAST FIRST ST. CALLAHAN, FL 32011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BAGLEY, MICHAEL O 604 ST. AUGUSTINE SOUTH DR. ST. AUGUSTINE, FL 32086
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01/24/05-80100-015 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Michael O. Bagley MICHAEL O. BAGLEY 1-17-05 904-797-4913
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #