2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 05, 2004 08:00 AM Secretary of State **DOCUMENT # P00000075496** THREE CREEK HUNT CLUB, INC. Principal Place of Business Mailing Address 916 LAKE JOSEPHINE DR SEBRING, FL 33872 916 LAKE JOSEPHINE DR SEBRING, FL 33872 02092004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1008979 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NIELANDER, WILLIAM J DO NOT WRITE 116 E INTERLAKE BLVD LAKE PLACID, FL 33852 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE FISHER, WESLEY C NAME 916 LAKE JOSEPHINE DR STREET ADDRESS U00000103252 04/05/04-80048-019 150.00 CATY-51-ZIP SEBRING, FL 33872 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHTY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP

FILED