

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000110027

Entity Name: NUTALL RISE HUNTING & FISHING CLUB, INC.

FILED  
Feb 02, 2009  
Secretary of State

**Current Principal Place of Business:**

8152 DIXIE RD  
QUITMAN, GA 31643

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2  
QUITMAN, GA 31643

**New Mailing Address:**

8152 DIXIE RD  
QUITMAN, GA 31643

FEI Number: 26-3591666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SCHNITKER, CLAY  
901 W. BASE STREET  
MADISON, FL 32340 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WELTZBARKER, DOYLE  
Address: 301 PLANTATION DRIVE  
City-St-Zip: QUITMAN, GA 31643

Title: D ( ) Delete  
Name: WILLIAMS, GRADY  
Address: 702 NORTH COURT STREET  
City-St-Zip: QUITMAN, GA 31643

Title: D ( ) Delete  
Name: LAURIE, GAVIN  
Address: 1575 MOULTRIE HIGHWAY  
City-St-Zip: QUITMAN, GA 31643

Title: P ( ) Delete  
Name: ROBERTS, TOMMY L  
Address: 349 DUNN RD  
City-St-Zip: QUITMAN, GA 31643

Title: ST ( ) Delete  
Name: WORTMAN, HENRY C  
Address: 8152 DIXIE RD  
City-St-Zip: QUITMAN, GA 31643

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY C. WORTMAN

ST

02/02/2009

Electronic Signature of Signing Officer or Director

Date