


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 03, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000069361 1. Entity Name GIDS BAY HUNTING CLUB, INC.	
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Principal Place of Business 3759 RANDALL ROAD GREEN COVE SPRINGS, FL 32043	Mailing Address 3759 RANDALL ROAD GREEN COVE SPRINGS, FL 32043
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DO NOT WRITE IN THIS SPACE



06262007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3717890	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent BEASLEY, GEORGE 3759 RANDALL ROAD GREEN COVE SPRINGS, FL 32043

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

U00000786828
07/03/07-80002-019 150.00

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEBER, DAVID 1945 EATON ROAD GREEN COVE SPRINGS, FL 32043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HALL, LARRY 7320 NW 172ND STREET ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HALL, JOEY RT. 1 BOX 8210 PALATKA, FL 32177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BEASLEY, GEORGE 3759 RANDALL RD. GREEN COVE SPRINGS, FL 32043
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George R. Beasley **GEORGE R BEASLEY** 6-27-07 904-838.3124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #