

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077206

FILED
Mar 05, 2007
Secretary of State

Entity Name: ST. JOHNS COUNTY FISH & WILDLIFE ASSOCIATION, INC.

Current Principal Place of Business:

5630 OLD STATE ROAD 207
ELKTON, FL 32033

New Principal Place of Business:

Current Mailing Address:

5630 OLD STATE ROAD 207
ELKTON, FL 32033

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGDON, JOSH
740-P CR 13A SOUTH
ELKTON, FL 32033 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: PD () Delete
Name: SYKES, BUCKY
Address: 5630 OLD STATE ROAD 207
City-St-Zip: ELKTON, FL 32033

Title: VPD () Delete
Name: HIGDON, JOSH
Address: 740-P CR 13A SOUTH
City-St-Zip: ELKTON, FL 32033

Title: VPD () Delete
Name: COOMES, J.B.
Address: 8 HARTSHORNE ST
City-St-Zip: ST AUGUSTINE, FL 32095

Title: VPD () Delete
Name: RODEN, MARK
Address: 1790 BENNETT ROAD
City-St-Zip: ST AUGUSTINE, FL 32092

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CURTIS WALKER

TREA

03/05/2007

Electronic Signature of Signing Officer or Director

Date