

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 29, 2005 08:00 AM
Secretary of State**

DOCUMENT # P94000083535

1. Entity Name
INFERNAL CLUB, INC.



Principal Place of Business
**100 UNION STREET
PERRY, FL 32348**

Mailing Address
**201 S WARNER AVE
PERRY, FL 32348 US**



03282005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1716830

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WOODFAULK, RANDOLPH
201 S WARNER AVE
PERRY, FL 32347**

**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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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
WOODFAULK, RANDOLPH
201 SOUTH WARNER STREET
PERRY, FL 32348**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
WOODFAULK, FLORA
201 SOUTH WARNER STREET
PERRY, FL 32348**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
WOODFAULK, RORY V
201 SOUTH WARNER STREET
PERRY, FL 32348**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000341851
04/27/05-00051-002 150.00

U000000341480
04/29/05-80018-020 150.00

**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)(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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Randolph Woodfaulk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/05
Date

(850) 584-7726
Daytime Phone #