

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751106

Entity Name: DIXIE HUNTING CLUB, INC.

Current Principal Place of Business:

1032 NE 444TH STREET
OLD TOWN, FL 32680

Current Mailing Address:

P.O. BOX 1866, N/A
CROSS CITY, FL 32628 US

FEI Number: 59-2110209

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIGHT, MARY O
1032 NE 444TH ST
OLD TOWN, FL 32680 US

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

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name WIMBERLEY, KENNETH
Address 801 NE 878 AVENUE
City-State-Zip: OLD TOWN FL 32680

Title DIRECTOR
Name MCKENDREE, ROBERT
Address 3392 NE 353 HWY
City-State-Zip: OLD TOWN FL 32680

Title SECRETARY, DIRECTOR
Name KIGHT, MARY O.
Address 1032 NE 444TH STREET
City-State-Zip: OLD TOWN FL 32680

Title VP, DIRECTOR
Name DAVIS, EUGENE
Address 1932 NE 512 AVENUE
City-State-Zip: OLD TOWN FL 32680

Title TREASURER, DIRECTOR
Name MIKELL, AARON
Address 324 NE 696 STREET
City-State-Zip: BRANFORD FL 32008

Title DIRECTOR
Name MARKHAM, HOUSTON SR.
Address 7859 NE 351 HWY
City-State-Zip: OLD TOWN FL 32680

Title DIRECTOR
Name WIMBERLEY, TIM
Address 715 NE 807 AVENUE
City-State-Zip: OLD TOWN FL 32680

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY O. KIGHT

SECRETARY

05/22/2020

Electronic Signature of Signing Officer/Director Detail

Date