<u>2021</u>	FLORIDA	NOT FO	R PROFIT	CORPOR	ATION AN	INUAL	REPORT

DOCUMENT# 767727

Entity Name: RAMSEY BEND HUNTING CLUB, INC.

Current Principal Place of Business:

SOUTH OF US 19 AND EAST OF SR 358 CROSS CITY, FL 32628

Current Mailing Address:

P.O. BOX 224 CROSS CITY, FL 32628-0224 US

FEI Number: 59-2669992

Name and Address of Current Registered Agent:

LAND, ALTON D 5112 SE 55A HWY OLD TOWN, FL 32680 US Certificate of Status Desired: No

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	ALTON D LAND	01/27/2021		
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	Р	Title	ST	
Name	BUCHANAN, ALVIN	Name	LAND, ALTON D	
Address	262 NE 601ST STREET	Address	5112 SE 55A HWY	
City-State-Zip:	OLD TOWN FL 32680	City-State-Zip:	OLD TOWN FL 32680	
Title	VP	Title	D	
Name	VALENTINE, JACKIE	Name	DURRANCE, JESSIE H	
Address	71 SW 128 ST	Address	PO BOX 52	
City-State-Zip:	CROSS CITY FL 32628	City-State-Zip:	CHIEFLAND FL 32626	
Title	D	Title	D	
Name	EVANS, LEROY E	Name	ROBERTS, ALLEN	
Address	350 SE 467TH STREET	Address	10091 NE 60TH ST	
City-State-Zip:	OLD TOWN FL 32680	City-State-Zip:	BRONSON FL 32621	
Title	DIRECTOR	Title	DIRECTOR	
Name	CARTER, DAVID T	Name	LYTLE, STANLEY	
Address	PO BOX 2895	Address	PO BOX 543	
City-State-Zip:	CHIEFLAND FL 32644	City-State-Zip:	CROSS CITY FL 32628	

Continues on page 2

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: ALTON D LAND

SECRETARY/TREASURER 01/27/2021

Electronic Signature of Signing Officer/Director Detail

FILED Jan 27, 2021 Secretary of State 8515029237CC

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CORBIN, WAYNE
Address	336 SW 911 STREET
City-State-Zip:	STEINHATCHEE FL 32359