GRAPEVINE, TX 76051 US												
FEI Number	: 20-0529674	Certificate of Status Desired: No										
Name and Address of Current Registered Agent:												
SMITH, PRESCOTT MR. 920 SOUTH MAIN STREET SUITE 100 GRAPEVINE, TX, FL 76051 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: PRESCOTT SMITH												
	Electronic Signature of Registered Agent											
Officer/Director Detail :												
Title	Ρ	Title	TREASURER									
Name	SMITH, PRESCOTT	Name	PINDER, CLEOLA ANGELA MRS.									
Address	PO BOX FC23302	Address	P. O. BOX FC-23302 FRESH CREEK									
City-State-Zip:	FRESH CREEK ANDROS BAHAMAS	City-State-Zip:	ANDROS ISLAND 23302									
Title	ASSISTANT TREASURER	Title	SECRETARY									
Name	MOXEY, JOEL	Name	WILSON, GENEVA MS.									
Address	CORAL HARBOUR PO BOX CB11023	Address	P. O. BOX FC-23302									
City-State-Zip:	NASSAU BAHAMAS AL	Audress	FRESH CREEK									
Title	DIRECTOR	City-State-Zip:	ANDROS ISLAND 23302									
Name	WILLIAMSON, KENDAL I MR.	Title	DIRECTOR									
Address	FREEPORT	Name	MILLER, CHRIS									
City-State-Zip:	GRAND BAHAMA BAHAMAS	Address	DELRAY BEACH									
<i>,</i>		City-State-Zip:	DELRAY BEACH FL									
Title	DIRECTOR											
Name	LEADON, SHAWN MR.	Title										
Address	CARGILL CREEK	Name	FERGUSON, ERIN MR.									
City-State-Zip:	ANDROS	Address	NEW PROVIDENCE									
		City-State-Zip:	NASSAU BAHAMAS									

## 2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F12000002346

### Entity Name: BAHAMAS SPORTFISHING & CONSERVATION CORPORATION

### **Current Principal Place of Business:**

920 SOUTH MAIN STREET SUITE 100 GRAPEVINE, TX 76051

#### **Current Mailing Address:**

920 SOUTH MAIN STREET SUITE 100 GRAPEVINE TX 76051 LIS

The a	bove name	ed entity	submits	this state	ement for	the purpos	se of ch	nanging its	s registered	l office o	r registered	agent, o	or both, i	n the S	State of I	Florida.

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: CLEOLA A. PINDER

TREASURER

03/26/2018

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Mar 26, 2018 Secretary of State CC9733851051