2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35323

Entity Name: OCHESSEE SPORTSMAN CLUB, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18522 NE BE BARFIELD RD ALTHA, FL 32421 **Current Mailing Address: New Mailing Address:** 18522 NE BE BARFIELD RD ALTHA, FL 32421 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARFIELD, BENNY E 18522 NE BE BARFIELD RD ALTHA, FL 32421 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MOLTON, LAMAR Name: Name: Address: 2102 RIVER RD Address: City-St-Zip: SNEADS, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: BARFIELD, JARROD Name: Address: 21103 NE MACEDONIA ROAD Address: City-St-Zip: BLOUNTSTOWN, FL 32424 City-St-Zip: Title: () Delete Title: () Change () Addition NEEL, ANDY Name: Name: 27929 NE CR 69A Address: Address: City-St-Zip: ALTHA, FL 32421 City-St-Zip: Title: () Delete Title: () Change () Addition Name: VARNUM, DAVID Name: Address: 23218 NE SR 69 Address: City-St-Zip: BLOUNTSTOWN, FL 32424 City-St-Zip: Title: () Delete Title: () Change () Addition HOLLIS, BENNIE Name: Name: P.O. BOX 418, HWY. 71S Address: Address: City-St-Zip: ALTHA, FL 32421 City-St-Zip: Title: () Delete Title: () Change () Addition BARFIELD, BENNY, Name: Name: Address: 18522 NE BE BARFIELD RD Address: ALTHA, FL 32421 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BENNY BARFIELD RA 04/27/2004