

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006321

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** IAMONIA LAKE HUNTING AND FISHING CLUB, INC.

**Current Principal Place of Business:**

16783 SE SOUTH PEAR ST.  
BLOUNTSTOWN, FL 32424

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 360  
BLOUNTSTOWN, FL 32424 US

**New Mailing Address:**

**FEI Number:** 59-0609996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STOUTAMIRE, WILLIAM F  
117 SE SOUTH PEAR STREET  
BLOUNTSTOWN, FL 32424 US

**Name and Address of New Registered Agent:**

STOUTAMIRE, WILLIAM F  
16783 SE SOUTH PEAR STREET  
BLOUNTSTOWN, FL 32424 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:

01/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MCMILLAN, PHILLIP  
Address: 15507 SE COASTAL ST.  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D ( ) Delete  
Name: LEONARD, HAYES  
Address: 15541 SE PEARL STREET  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D ( ) Delete  
Name: MCCLELLAN, HENTZ  
Address: 17518 NE TERESA TERR. ST.  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D ( ) Delete  
Name: HOLLEY, TRUMAN  
Address: 16766 SW CHIPOLA STREET  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: D ( ) Delete  
Name: CURLEE, ED  
Address: 13659 SE BRIDGES LANE  
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: T ( ) Delete  
Name: STOUTAMIRE, WILLIAM F  
Address: PO BOX 360  
City-St-Zip: BLOUNTSTOWN, FL 32424

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WILLIAM F. STOUTAMIRE

T

01/14/2009

Electronic Signature of Signing Officer or Director

Date