

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000006321

**Entity Name:** IAMONIA LAKE HUNTING AND FISHING CLUB, INC.**Current Principal Place of Business:**16783 SE PEAR STREET  
BLOUNTSTOWN, FL 32424**Current Mailing Address:**P O BOX 360  
BLOUNTSTOWN, FL 32424 US**FEI Number:** 59-0609996**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STOUTAMIRE, WILLIAM F  
16783 SE 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MCMILLAN, PHILLIP  
Address 15507 SE COASTAL ST.  
City-State-Zip: BLOUNTSTOWN FL 32424

Title D  
Name LEONARD, HAYES  
Address 15541 SE PEAR STREET  
City-State-Zip: BLOUNTSTOWN FL 32424

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

Title D  
Name HOLLEY, TRUMAN  
Address 16766 SW CHIPOLA STREET  
City-State-Zip: BLOUNTSTOWN FL 32424

Title D  
Name CURLEE, ED  
Address 13659 SE BRIDGES LANE  
City-State-Zip: BLOUNTSTOWN FL 32424

Title T  
Name STOUTAMIRE, WILLIAM F  
Address 16783 S PEAR STREET  
City-State-Zip: BLOUNTSTOWN FL 32424

Title DIRECTOR  
Name DANIELS, JERRY  
Address P. O. BOX 676  
City-State-Zip: BLOUNTSTOWN FL 32424

Title DIRECTOR  
Name BRISTOL, CLIFFORD DR.  
Address 15333 NW CR 12  
City-State-Zip: BRISTOL FL 32321

**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: WILLIAM F. STOUTAMIRE****TREASURER****01/16/2013**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LEONARD, MIKE  
Address 11263 SW CR 275  
City-State-Zip: BLOUNTSTOWN FL 32424

Title DIRECTOR  
Name MCCLELLAN, GUS  
Address P. O. BOX 135  
City-State-Zip: BLOUNTSTOWN FL 32424

Title DIRECTOR  
Name GASKIN, JACK  
Address 16236 ST. RD. 71 S  
City-State-Zip: BLOUNTSTOWN FL 32424

Title DIRECTOR  
Name PEACOCK, JOHN CHARLES  
Address P. O. BOX 613  
City-State-Zip: BLOUNTSTOWN FL 32424

Title DIRECTOR  
Name HAYES, D. BROOKS II  
Address P. O. BOX 794  
City-State-Zip: BLOUNTSTOWN FL 32424