


FILE NOW: FILING FEE IS \$61.25

FILED

Mar 18 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	--

**DOCUMENT # N94000006321 (3)**

1. Corporation Name

**IAMONIA LAKE HUNTING AND FISHING CLUB, INC.**

Principal Place of Business

Mailing Address

**117 S PEAR STREET  
BLOUNTSTOWN FL 32424**

**P O BOX 360  
BLOUNTSTOWN FL 32424  
US**



3. Date Incorporated or Qualified

**12/28/1994**

4. FEI Number

**59-0609996**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STOUTAMIRE, WILLIAM F  
117 S PEAR STREET  
BLOUNTSTOWN FL 32424**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.150P of the Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am \_\_\_\_\_, Secretary of the corporation, and I hereby accept the appointment as registered agent.

SIGNATURE

Signature, typed or printed name of registered agent, and date (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE  
NAME **McMILLAN, PHILLIP**  
STREET ADDRESS **1807 RIVER ST.**  
CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

1.1 TITLE **PRESIDENT** ☐ Change ☒ Addition  
1.2 NAME **Michael Eldridge**  
1.3 STREET ADDRESS **Rt. 2, Box 697-E**  
1.4 CITY-ST-ZIP **Blountstown, FL 32424**

TITLE **D** ☐ DELETE  
NAME **LEONARD, HAYES**  
STREET ADDRESS **1701 S. PEAR**  
CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

2.1 TITLE **1ST VICE PRESIDENT** ☐ Change ☒ Addition  
2.2 NAME **Edward Holley**  
2.3 STREET ADDRESS **807 Burns Avenue**  
2.4 CITY-ST-ZIP **Blountstown, FL 32424**

TITLE **D** ☐ DELETE  
NAME **MCCLELLAN, HENTZ**  
STREET ADDRESS **119 RIVER ST.**  
CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

3.1 TITLE **2ND VICE PRESIDENT** ☐ Change ☒ Addition  
3.2 NAME **Cleve Fleming**  
3.3 STREET ADDRESS **418 Cedar Street**  
3.4 CITY-ST-ZIP **Blountstown, FL 32424**

TITLE **D** ☐ DELETE  
NAME **HOLLEY, TRUMAN**  
STREET ADDRESS **100 CHIPOLA RD.**  
CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

4.1 TITLE **SECRETARY & TREASURER** ☐ Change ☒ Addition  
4.2 NAME **William F. Stoutamire**  
4.3 STREET ADDRESS **P. O. Box 360-117 South Pear Street**  
4.4 CITY-ST-ZIP **Blountstown, FL 32424**

TITLE **D** ☐ DELETE  
NAME **HALLEY, JOHNNY**  
STREET ADDRESS **239 N. MAIN ST.**  
CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **PARKER, JIM**  
STREET ADDRESS **126 N. MAIN**  
CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *William F. Stoutamire*

**3-3-98 850-674-5007**

CFR2037 (10/97)