## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 734824**

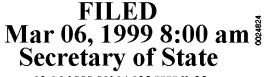
1. Corporation Name

FLORIDA KEYS SHOOTING CLUB, INC.

Principal Place of Business
750 MADRID RD.
KEY LARGO EL 33037

Mailing Address

P. O. BOX 2468



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		-	. "		-		<u> </u>				
Principal Place of Business 2a. Mailing Address						3. Date Ir	corporated o	r Qualifed			
21 26					01/19/1976					·	
Suite, Apt. #, etc. Suite, Apt. #, etc.						4. FEI Nu				App	lied For
27						65-00	38046				Applicable
City & State     City & State       23     28					5. Certifcate of Status			Desired	\$8.75 Additional Fee Required		
Zip	Country 25	Zip	C 30	ountry	4		n Campaign und Contribu			\$5.00 i Added to	• .
24	9. Name and Address of Curre		[30]	_			and Addres		egistered	Agent	
	o. Hame and Address of Saire	one reagnetor or a region.		81 1	Name						
BECKMEYER, KARL 81990 OVERSEAS HIGHWAY #201							Al dissilation		his.		
					Street Address (P.O. Box Number is Not Acceptable)						
										i	
ISLAMORADA FL 33036										· ·	
				84 (	City				FL	85 Zip C	ode
office or i	to the provisions of Sections 617.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such chang gations of, Section 617.0	ge was autnonz 1503, Florida St	ed by the atutes.	e corporatio	on's board of o	lirectors. I he	reby accep	DATE	ntment as reg	
12.		ND DIRECTORS	(NOTE: Registe		grintare require		ONS/CHANG	ES TO OF	ICERS AN	D DIRECTO	RS IN 12
TITLE	TSD		ELETE 1,1	TITLE	7:	SD				Change	Addition
NAME	KIRBY, OWEN		1.2	NAME	K.	RBY. O	ے الاعادر		-		
STREET ADDRESS	221 ALHAMBRA DR.		13	STREET AD	ORESS 7	RBY, ON	arîo 1	20,			
CITY-ST-ZIP	KEY LARGO, FL 0			CITY-ST-Z	,	ey LARS			7 ده		•
TITLE	D	☐ DE		TITLE		7	,			Change	Addition
NAME	BROWN, JAMES		2.2	NAME				••	+		
STREET ADDRESS	ALL DE AUTOTON OLIOBEO DE	R	2.3	STREET AD	DRESS						
CITY-ST-ZIP	TAVERNIER FL 33070	•		4 CITY-ST-Z							
TITLE	D	□ Di		TITLE						Change	☐ Addition
NAME	HARRELSON, WILLIAM		3.2	NAME							
STREET ADDRESS	44 001404110 11/5		3.3	STREET AL	DORESS					٠.	
CITY-ST-ZIP	KEY LARGO FL			CITY-ST-Z							
TITLE	D	□ Di		TITLE			<del>,</del>			☐ Change	☐ Addition
NAME	MURPHY, JOHN			2 NAME							

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, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CiTY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS 144 BUTTONWOOD LN

LAYTON FL 33001

MALKA, MARK

KEY LARGO FL

225 ALAHAMBRA

ELHERS, GEORGE

200 GALLEON LN

ISLAMORADA FL 33036

☐ DELETE

☐ DELETE

Change

Change

☐ Addition

☐ Addition