

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734824

FILED
May 04, 2007
Secretary of State

Entity Name: FLORIDA KEYS SHOOTING CLUB, INC.

Current Principal Place of Business:

102570 OVERSEAS HIGHWAY
KEY LARGO, FL 33036

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2468
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 65-0038046 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MULICK, NICHOLAS W
91645 OVERSEAS HIGHWAY
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

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:

Title: TSD () Delete
Name: BARNEY, STEVEN M
Address: 102570 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33036

Title: PD () Delete
Name: SUDDRETH, SHANE
Address: 89375 OLD HIGHWAY
City-St-Zip: TAVERNIER, FL 33070

Title: VP () Delete
Name: GARRETT, ROY
Address: 436 LAGUNA
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: NEWTON, ANDY
Address: 21 BLACKWATER LANE
City-St-Zip: KEY LARGO, FL 33036

Title: D () Delete
Name: JONES, STEVE
Address: P.O.BOX
City-St-Zip: KEY LARGO, FL 33036

Title: D () Delete
Name: REEVES, RALPH
Address: 230 NAVAJO STREET
City-St-Zip: TAVERNIER, FL 22070

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
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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: STEVEN BARNEY

TSD

05/04/2007

Electronic Signature of Signing Officer or Director

_____ Date