

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortonham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 737744 (3)

1. Corporation Name

FLORIDA TRAPSHOOTERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2810 SO DER RD
PLANT CITY FL 33567
US

2810 SO DER RD
PLANT CITY FL 33567
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/05/1977

3a. Date of Last Report

02/23/1994

4. FEI Number

23-7317363

Applied For

Not Applicable

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 190.022,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 2810 S. Der Rd

26 2810 S. Der Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Plant City FL

28 Plant City, FL

Zip

Country

Zip

Country

24 33567

25 Hillsborough

29 33567

30 Hillsborough

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AYER, KIM
2810 SO DER RD
PLANT CITY FL 33567

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 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Kim Ayer

April 29, 1995

(Signature, typed or printed name of registered agent and title & application)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	V
NAME	FERGUSON, LAIRD
STREET ADDRESS	2010 NE 17TH CT APT C
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	P
NAME	DARCEY, GENE
STREET ADDRESS	2420 JASON STREET
CITY - ST - ZIP	MERRITT ISLAND FL
TITLE	ST
NAME	AYERS, KIM
STREET ADDRESS	2810 SO DER RD
CITY - ST - ZIP	PLANT CITY FL
TITLE	D
NAME	MAYHUE, CARL
STREET ADDRESS	825 N E 4TH ST
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	D
NAME	STINEBRING, MORRIS
STREET ADDRESS	17000 PATTERSON RD
CITY - ST - ZIP	ODESSA FL
TITLE	D
NAME	SHORT, OLIVER
STREET ADDRESS	5019 SUWANEE AVE
CITY - ST - ZIP	TAMPA FL

11 TITLE	V Sandy Mitchell Jr.	☐ Change ☐ Addition
12 NAME	17000 Patterson Rd #19	
13 STREET ADDRESS	Odessa, FL 33556	
14 CITY - ST - ZIP		
21 TITLE	P	☒ Change ☐ Addition
22 NAME	Short, Oliver	
23 STREET ADDRESS	5019 Suwanee Ave	
24 CITY - ST - ZIP	Tampa, FL 33603	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE	D Ingram, Buster	☒ Change ☐ Addition
42 NAME	2570 St. Anthony's St.	
43 STREET ADDRESS	Titusville, FL 32780	
44 CITY - ST - ZIP		
51 TITLE	D	☒ Change ☐ Addition
52 NAME	Ron Rutger	
53 STREET ADDRESS	3404 W. Lawn Ave.	
54 CITY - ST - ZIP	Tampa, FL 33611	
61 TITLE	D	☐ Change ☐ Addition
62 NAME	Jim Beasley	
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *Kim Ayer*

(Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

April 29, 95 813 731-3260

Date

Telephone (Area #)