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May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **737744** (3)
1. Corporation Name
FLORIDA TRAPSHOOTERS' ASSOCIATION, INC.



Principal Place of Business 2810 S. DER RD. PLANT CITY FL 33567 US	Mailing Address 2810 S. DER RD. PLANT CITY FL 33567 US
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3. Date Incorporated or Qualified 01/05/1977
4. FEI Number 23-7317363
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

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**AYER, KIM
2810 SO DER RD
PLANT CITY FL 33567**

10. Name and Address of New Registered Agent

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 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P ☒ DELETE
NAME	ARLENE TOBACK
STREET ADDRESS	17000 PATTERSON RD #47
CITY-ST-ZIP	ODESSA FL
TITLE	VP ☒ DELETE
NAME	BUSTER, INGRAM
STREET ADDRESS	2570 ST ANTHONY'S ST
CITY-ST-ZIP	TITUSVILLE FL
TITLE	ST ☐ DELETE
NAME	AYERS, KIM
STREET ADDRESS	2810 SO DER RD
CITY-ST-ZIP	PLANT CITY FL
TITLE	D ☐ DELETE
NAME	SANDY MITCHELL, JR.
STREET ADDRESS	17000 PATTERSON RD #40
CITY-ST-ZIP	ODESSA FL
TITLE	D ☒ DELETE
NAME	PONCE, LEON
STREET ADDRESS	4442 COBIA DR SE
CITY-ST-ZIP	ST PETERSBURG FL
TITLE	D ☐ DELETE
NAME	BEASLEY, JIM
STREET ADDRESS	5019 SOWANEE AVE
CITY-ST-ZIP	TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	Pres Harry Plymire
1.3 STREET ADDRESS	6537 Harbor Dr.
1.4 CITY-ST-ZIP	Hudson, FL 34667
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	Vice-Pres Skipper Wright
2.3 STREET ADDRESS	634 Dyal St.
2.4 CITY-ST-ZIP	Jacksonville, FL 32206
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	5957 Riviera Lane
4.4 CITY-ST-ZIP	New Port Richey, FL 34655-5679
5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	Delegate George Horton
5.3 STREET ADDRESS	1943 CR 429
5.4 CITY-ST-ZIP	Lake Panasoffkee, FL 33536
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	17001 Patterson Rd #410
6.4 CITY-ST-ZIP	Odessa, FL 33556

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: Kim Ayers Kim Ayers April 15, 1998 813 737-3260

CF2E037 (10/97)