## **2000 UNIFORM BUSINESS REPORT (UBR)**

## Apr 24, 2000 8:00 am Secretary of State **DOCUMENT # 737744** 1. Entity Name FLORIDA TRAPSHOOTERS' ASSOCIATION, INC. 04-24-2000 90296 023 \*\*\*\*61.25 Mailing Address Principal Place of Business 2810 S. DER RD. 2810 S. DER RD. PLANT CITY FL 33567-2340 PLANT CITY FL 33567 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 23-7317363 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) AYER, KIM 2810 SO DER RD PLANT CITY FL 33567 City Zip Code FL 8. 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. March & March DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Delete Change Addition TITLE TIT! F Gene Darcey 2420 Jason St RUTGER, RON NAME NAME STREET ADDRESS STREET ADORESS 3404 W LAWN AVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33611 TITLE ☐ Change ☐ Addition ☐ Delete TITLE WRIGHT, S NAME NAME STREET ADDRESS STREET ADDRESS 634 DYAL ST CITY-ST-ZIP CITY-ST-ZIP **JAX FL 32206** Change ☐ Addition TITLE ST ☐ Delete TITLE AYERS, KIM NAME NAME STREET ADDRESS STREET ADDRESS 2810 SO DER RD CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL ☐ Change ☐ Addition □ Delete TITLE SANDY MITCHELL, JR. NAME STREET ADDRESS STREET ADDRESS 5957 RIVIERA LN CITY-ST-7IP CITY-ST-ZIP NPR FL 34655 Addition Delete Change D TITLE Morrie Stinebring BETZ, RICHARD NAMÉ NAME 17133 Golf Vista Crt. STREET ADDRESS STREET ADDRESS 630 FAYETTE DR S CITY-ST-ZIP 0dessa, F1 33556 CITY-ST-ZIP SAFETY HARBOR FL 34695 Delete TITLE Change ☐ Addition TITI F Robert Smith NAME BEASLEY, JIM NAME 35 Golf VistaCrt. STREET ADDRESS STREET ADDRESS 17102 TARGET WAY CITY-ST-ZIP CITY-ST-ZIP ODESSA FL 33556

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

lpul 17,2000

819 132-8035 Davigne Phone #