## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 737744**

FILED Mar 05, 2004 Secretary of State

Entity Name: FLORIDA TRAPSHOOTERS' ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business: 2810 S. DER RD. PLANT CITY, FL 33567 US PLANT CITY, FL 33566 US **Current Mailing Address: New Mailing Address:** 2810 S. DER RD. 2810 DER RD PLANT CITY, FL 33567 US PLANT CITY, FL 33566 US FEI Number: 23-7317363 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AYERS, KIM 2810 SO DER RD 2810 DER RD PLANT CITY, FL 33567 PLANT CITY, FL 33566 US US 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: KIM AYERS 03/05/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VΡ () Change () Addition () Delete DARCEY, GENE Name: Name: 2420 JASON ST Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: Title: Title: () Change () Addition ( ) Delete Name: WRIGHT, S Name: Address: 634 DYAL ST Address: City-St-Zip: JAX, FL 32206 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition AYERS, KIM Name: AYERS, KIM Name: 2810 SO DER RD Address: Address: 2810 DER RD City-St-Zip: PLANT CITY, FL City-St-Zip: PLANT CITY, FL 33566 Title: ( ) Delete Title: () Change () Addition SANDY MITCHELL, JR. Name: Name: 5957 RIVIERA LN Address: Address: City-St-Zip: NPR, FL 34655 City-St-Zip: Title: () Delete Title: () Change () Addition GAZDA, EDWARD Name: Name: 485 10TH AVE Address: Address: VERO BEACH, FL 32962 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition QUILLIAN, EDGAR Name: Name: Address: 805 HALLARD RD Address: COCOA, FL 32926 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KIM AYERS SEC 03/05/2004