2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 13, 2006 8:00 am **Secretary of State DOCUMENT # 737744** 1. Entity Name 02-13-2006 90013 002 ****61.25 FLORIDA TRAPSHOOTERS' ASSOCIATION, INC. Mailing Address Principal Place of Business 2810 DER RD. 2810 DER RD. PLANT CITY FL 33566 PLANT CITY FL 33566 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 23-7317363 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name AYERS, KIM Street Address (P.O. Box Number is Not Acceptable) 2810 DER RD PLANT CITY FL 33566 City Zip Code 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, 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition DARCEY, GENE NAME NAME 2420 JASON ST STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL 32952 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE WRIGHT, S NAME NAME 834 DYAL ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JAX FL 32206 CITY-ST-ZIP Thangs TITLE Daleto TITLE _ Addition AYERS, KIM NAME NAME 2810 DER RD STREET ADDRESS STREET ADDRESS CITY-ST-7IP PLANT CITY FL 33566 CITY-ST-ZIP Delete TITLE □ Change Addition TITLE NAME WHITE, TOM NAME STREET ADDRESS 1259 WINDSOR PL STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32205 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition BEASLEY, JIM NAME NAME 18138 WEBSTER GROVE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HUDSON FL 34667 CITY-ST-ZIP TITLE Delete TITL F ☐ Change Addition QUILLIAN, EDGAR NAME NAME 6041 RANCHWOOD DR STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

CITY-ST-ZIP

SIGNATURE: _

CITY-ST-ZIP

COCOA FL 32926

Kim ayurs

Kim Avers

Jan.30,06

FILED

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