

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737744

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** FLORIDA TRAPSHOOTERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6908 SIMCA DR.  
JACKSONVILLE, FL 32277 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8918  
JACKSONVILLE, FL 32239 US

**New Mailing Address:**

FEI Number: 23-7317363

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BENNETT, CRYSTAL  
6908 SIMCA DR.  
JACKSONVILLE, FL 32277 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BENNETT, RALPH  
Address: PO BOX 8918  
City-St-Zip: JACKSONVILLE, FL 32239

Title: VP  
Name: TOM, WHITE  
Address: 1259 WINDSOR PLACE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: ST  
Name: BENNETT, CRYSTAL  
Address: P.O. BOX 8918  
City-St-Zip: JACKSONVILLE, FL 32239

Title: D  
Name: WHITE, TOM  
Address: 1259 WINDSOR PL  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D  
Name: BEASLEY, JIM  
Address: 18138 WEBSTER GROVE DR  
City-St-Zip: HUDSON, FL 34667

I hereby 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 all other like empowered.

SIGNATURE: CRYSTAL BENNETT

ST

02/16/2011

Electronic Signature of Signing Officer or Director

Date