

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90161 026 ****61.25

DOCUMENT # N13841

1. Entity Name

JACKSONVILLE SKEET AND TRAP CLUB, INC.



Principal Place of Business

**12125 NEW BERLIN RD.
JACKSONVILLE FL 32226**

Mailing Address

**12125 NEW BERLIN RD.
JACKSONVILLE FL 32226**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6151255**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LAWRENCE, ROLFE C
720 BLACKSTONE BUILDING, 233 E. BAY ST.
JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I 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)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLOEPPE, CHRIS 7932 QUALWOOD DR JACKSONVILLE FL 32256	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD REINSTINE, FRANK 1519 SAN MATEO AVE JACKSONVILLE FL 32207	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROLFE, L. C. 720 BLACKSTONE BUILDING JACKSONVILLE FL 32202	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, BERNIE 1827 HOLLY FLOWER LN ORANGE PARK FL 32067	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THOMAS, JOHN 4859 MAYWOOD DR JACKSONVILLE FL 32277	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRELL, GLEN 3948 SINBEAM RD #8 JACKSONVILLE FL 32257	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Larry Giesen V.P. 12644 SHINNETOCK WAY JACKSONVILLE, FL 32225 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	KATHERINE H HZING 12125 NEW BERLIN RD JACKSONVILLE FL 32226 ☐ Change ☒ Addition Secretary

CR2E037 (10/02)

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/2003

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