

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761221

FILED
Jul 01, 2005
Secretary of State

Entity Name: SARASOTA GUN CLUB, INC.

Current Principal Place of Business:

KNIGHT TRL PK, RUSTIC.RD, LAUREL, FL
P. O. BOX 802
NOKOMIS, FL 342740802

New Principal Place of Business:

Current Mailing Address:

KNIGHT TRL PK, RUSTIC.RD, LAUREL, FL
P. O. BOX 802
NOKOMIS, FL 342740802

New Mailing Address:

FEI Number: 59-1916803 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CALDERONE, ROBERT
3322 SHEFFIELD CIR
SARASOTA, FL 34239 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: PD () Delete
Name: CALDERONE, R
Address: 3322 SHEFFIELD CIRCLE
City-St-Zip: SARASOTA, FL 34239

Title: TD () Delete
Name: WEINSTOCK, BLAIR
Address: 1103 WILD CITRUS LANE
City-St-Zip: SARASOTA, FL 34240

Title: SD () Delete
Name: SWAINSON, RALPH
Address: 7211 ST. JOHNS WAY
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: VD () Delete
Name: VOSNOS, WILLIAM
Address: 6935 CUMBERLAND TERRACE
City-St-Zip: UNIVERSITY PARK, FL 34201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: BOB CALDERONE

PRES

07/01/2005

Electronic Signature of Signing Officer or Director

Date