## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10423

FILED Apr 15, 2009 Secretary of State

Entity Name: MARKHAM SKEET & TRAP CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 16001 W STATE RD. 84 SUNRISE, FL 33326 **Current Mailing Address: New Mailing Address:** 460 NW 36 DR P O BOX 8853 OAKLAND PARK, FL 33309 SUNRISE, FL 33313 FEI Number: 65-0140081 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: TUCKER, NANCY A 460 NW 36 DR OAKLAND PARK, FL 33309 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NORRIS, STEVE Name: Name: 4026 NE 5TH AVE Address: Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCHWAB, JERRY Name: Address: 1731 SW 30TH PLACE Address: City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: Title: () Delete Title: () Change () Addition FREEMAN, MICHAEL Name: Name: 4970 SW 170TH AVE Address: Address: City-St-Zip: FT LAUDERDALE, FL 33331 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: TUCKER, ROBERT Name: TUCKER, ROBERT 4026 NE 5TH AVE Address: 460 NW 36 ST Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: OAKLAND PARK, FL 33309 Title: () Delete Title: (X) Change ( ) Addition GOULD, STEPHEN NORRIS, STEVEN Name: Name: 3306 COMMADORE CT 4026 NE 5TH AVE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: OAKLAND PARK, FL 33334 Title: () Delete Title: () Change () Addition SOUTH, WAYNE Name: Name: Address: 641 SW 93RD AVE Address: PEMBROKE PINES, FL 33025 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN NORRIS VP-T 04/15/2009