

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761221

**Entity Name:** SARASOTA TRAP SKEET & SPORTING CLAYS, INC.**Current Principal Place of Business:**3445 RUSTIC RD  
NOKOMIS, FL 34275**Current Mailing Address:**SARASOTA TRAP SKEET AND SPORTING CLAYS, INC.  
P. O. BOX 802  
NOKOMIS, FL 34274-0802 US**FEI Number:** 59-1916803**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROURA, MIGUEL R  
100 SOUTH ASHLEY DRIVE  
SUITE 1350 SUITE 1350  
TAMPA, FL 33602 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:** MIGUEL R. ROURA

01/08/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name MINNIG, GEORGE  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title SECRETARY  
Name WEBSTER, DON  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title D  
Name SARDOS, RICK  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title PRESIDENT  
Name NAJAR, DWAYNE  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title DIRECTOR  
Name GLASER, WILLIAM  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title DIRECTOR  
Name QUEEN, WILLIAM  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title DIRECTOR  
Name ROURA, MIGUEL  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

Title DIRECTOR  
Name NOEL, BRUZ  
Address 3445 RUSTIC RD  
City-State-Zip: NOKOMIS FL 34275

**Continues on page 2**

*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:** DONALD WEBSTER

SECRETARY

01/08/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	CHIARAMONTE, VINCE
Address	3445 RUSTIC RD
City-State-Zip:	NOKOMIS FL 34275