

2014 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 GUN CLUB INC
P. O. BOX 802
NOKOMIS, FL 34274-0802**FEI Number:** 59-1916803**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAZZARANTANI, GEORGE H ESQ.
1800 SECOND STREET - STE. 708
SARASOTA, FL 34236 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**Officer/Director Detail :**

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

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|-----------------|------------------|
| Title | S |
| 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 | T |
| Name | THACKER, STEVE |
| Address | 3445 RUSTIC RD |
| City-State-Zip: | NOKOMIS FL 34275 |

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|-----------------|------------------|
| Title | VP |
| Name | BECKMAN, NORMAN |
| Address | 3445 RUSTIC RD |
| City-State-Zip: | NOKOMIS FL 34275 |

| | |
|-----------------|------------------|
| Title | D |
| 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 |

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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: DON WEBSTER**SECRETARY****01/29/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

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