

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000005339

Entity Name: BOWHUNTING PRESERVATION ALLIANCE, INC.**Current Principal Place of Business:**16 S MINNESOTA
NEW ULM, MN 56073**Current Mailing Address:**16 S MINNESOTA
NEW ULM, MN 56073 US**FEI Number:** 47-0887893**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT/CEO
Name POOLE, JEFF
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title CHAIR
Name MCGOVERN, JAMES
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title VICE-CHAIR
Name WILLIAMS, TERESA
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title VICE-CHAIR
Name LENE, JONATHAN
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name LUCKY, AARON
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name PARKER, DAVE
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name COLGROVE, DEB
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name KINARD, GARY
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

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: JEFF POOLE

PRESIDENT/CEO

04/15/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SCHOLES, JAY
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name MAXFIELD, JOEL
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name ARNOLD, KEITH
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name SMITH, MATT
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name PHILLIPS, RANDY
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name STREFF, SEAN
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name THOMAS, TIMMY
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name ADEE, JEFF
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name GORMAN, JUSTIN
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name COPELAND, MARK
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name KITTS, RANDY
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name HARTL, ROD
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title SECRETARY/TREASURER
Name POOLE, JEFF
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073

Title DIRECTOR
Name PIERSOL, WAYNE
Address 16 S MINNESOTA
City-State-Zip: NEW ULM MN 56073