2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702868

FILED Apr 29, 2005 Secretary of State

Entity Name: NEW FORT MYERS GUN CLUB INC

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	TH AVENUE RAL, FL 33990	US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	4TH STREET RAL, FL 33993	US			
FEI Number:	59-1843594	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:					
TAMUTIS, MICHAEL W 2967 RIBBON CT. FT MYERS, FL 33905 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/CHANG	SES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I GALLO, MORRIS 12734 KENWOO FORT MYERS, F	DD LANE S.W.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I TAMUTIS, MICH 2967 RIBBON C FT MYERS, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () DUNN, LEE 2622 N.W. 4TH S CAPE CORAL, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () KROUS, JAMES 303 BELAIRE RI FORT MYERS, F	D.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BEDFORD, ROB 621 S.W. 3RD C CAPE CORAL, F	T #102A	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: LEE DUNN T 04/29/2005