2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2007
Secretary of State

DOCUMENT# 705137

Entity Name: WYOMING ANTELOPE CLUB, FLORIDA CHAPTER, INC.

Current Principal Place of Business:

3700 126TH AVE N
PINELLAS PK, FL 34664

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22352
ST PETERSBURG, FL 337422352 US

New Mailing Address:

FEI Number: 59-2506422 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TADDER, DAVID A
7350 14TH ST. AVE. N,E.
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

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:

Title:	S	( ) Delete
Name:	ZAWACKI, JOE	
Address:	1766 MISSISSPPI AVE N.E.	
City-St-Zip:	ST PETERSBURG, FL 35703	
Title:	SD	( ) Delete
Name:	DIPPLE, FRANK B.,	
Address:	7070 60TH STREET N	
City-St-Zip:	PINELLAS PARK, FL	
Title:	T	( ) Delete
Name:	HAYWORTH, CHARLES R	
Address:	1320 50TH AVENUE NE	
City-St-Zip:	ST. PETERSBURG, FL 33703	
Title:	P	( ) Delete
Name:	SMITH, MIKE	
Address:	9421 56TH WAY NO.	
City-St-Zip:	PINELLAS PARK, FL 33782	
Title:	VP	( ) Delete
Name:	TADDER, DAVE	
Address:	7350 14TH STREET NE	
City-St-Zip:	ST. PETERSBURG, FL 33702	
Title:	VP	( ) Delete
Name:	OALMANN, BILL	
Address:	9010 55 WAY	
City-St-Zip:	PINELLAS PARK, FL 33782	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES R HAYWORTH T 02/21/2007
Electronic Signature of Signing Officer or Director — Date