## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 705921** 

FILED Apr 11, 2006 Secretary of State

Entity Name: FORT MYERS ROD AND GUN CLUB, INC.

	Principal Place of Busine	ss:	New Principal Pla	ce of Business:
P O BOX FORT MY	1748 ERS, FL 33902			
Current N	failing Address:		New Mailing Add	ress:
P O BOX FORT MY	1748 ERS, FL 33902			
FEI Number	r: 59-0977484 FEI Numbe	er Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of Current Reg	jistered Agent:	Name and Addres	s of New Registered Agent:
	STANLEY R TLE LANE 33920 US			
	e named entity submits this e of Florida.	statement for the	purpose of changing its regist	ered office or registered agent, or both
SIGNATU	RE:			
	Electronic Signature	e of Registered Ag	ent	Date
OFFICER	S AND DIRECTORS:		ADDITIONS/CHAI	NGES TO OFFICERS AND DIRECTO
Title: Name:	PRES ( ) Delete JOHNSON, GARY 3845 HUNTLEY ST		Title: Name: Address:	() Change () Addition
	FORT MYERS, FL 33905		City-St-Zip:	
City-St-Zip: Title: Name: Address:				()Change()Addition
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	FORT MYERS, FL 33905 S/T ( ) Delete HEATH, STANLEY R 19591 LITTLE LANE		City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip:	FORT MYERS, FL 33905  S/T () Delete HEATH, STANLEY R 19591 LITTLE LANE FT MYERS, FL 33920  VP () Delete THEDE, MARK 346 LAKEVIEW DR		City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	• • • • • • • • • • • • • • • • • • • •
City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address: Address:	FORT MYERS, FL 33905  S/T () Delete HEATH, STANLEY R 19591 LITTLE LANE FT MYERS, FL 33920  VP () Delete THEDE, MARK 346 LAKEVIEW DR N. FORT MYERS, FL 33917  D () Delete HOGG, JAMES P.O. BOX 60112		City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address:	()Change()Addition

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: STANLEY R. HEATH S/T 04/11/2006