2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 22, 2008 8:00 am Secretary of State 01-22-2008 90077 006 ****70.00

DOCUMEN I # 707658 1. Entity Name SKYWAY TRAP & SKEET CLUB, INC.								
Principal Place of Business 3200 74TH AVENUE NORTH ST PETERSBURG, FL 33702 Mailing Address 3200 74TH AVENUE NORTH ST PETERSBURG, FL 33702								
Principal Place of Business - No P.O. Box # 3. Mailing Address				,				
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		01102008 Chg-	-NP CR2E03	7 (12/06)		
City & State		City & State		····	4. FEI Number 59-0838669			
Zip	्र Country	Zip	Cou	ntry	5. Certificate of Statu	s Desired	\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent		Name	7. Name and Addres	ss of New Registered A	gent	
EMBRY, WILLIAM C				Street Address (P.O. Box Number is Not Acceptable)				
1038 DOGWOOD DR. DUNEDIN, FL ² 34698				Silvest Address (r.O. DOX Normber Is NOT Acceptable)				
				City			T 7:- 0	
				City		FL_	Zip Cod	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing Trust Fund Contribution.					\$5.00 May Be Added to Fees	Make check Florida Depart		
10. OFFICERS AND DIRECTORS 11 IffLE PD □ Delete □ Delete					ADDITIONS/CHANGES	TO OFFICERS AND DIF		
1 1	EMBRY, WILLIAM			;			☐ Change	☐ Addition
i I				ET ADDRESS - ST- ZIP				
	VPD Delete III						☐ Change	☐ Addition
1	TOWNSEND, ROGER 4332 44TH ST. S			E ET ADORESS				
CITY-ST-ZIP	1			- ST - ZIP				
TITLE	STD ————————————————————————————————————	Delete	TITLE NAMI				Change _	Addition
STREET ADDRESS	2926 COACH MAN AVE		STRE	ET ADDRESS		•		
CITY-ST-ZIP TITLE	TAMPA, FL 33611	☐ Delete	CITY	- ST- ZIP			Change	☐ Addition
NAME	LAYFIELD, JAMES H	□ Denete	NAM	E			change	
STREET ADDRESS CITY-ST-ZIP	12377 MOUTARA DR. LARGO, FL 33773			ET ADDRESS - ST - ZIP				
TITLE	В	☐ Delete	TITLE	E			Change	Addition
NAME STREET ADDRESS	REYNOLDS, BOB 1924 NOLFORD # 2		NAM STRE	EET ADDRESS				
CITY-ST-ZIP	CLEARWATER, FL 33962			-ST-ZIP				
TITLE NAME		☐ Delete	- TITLI Nam	l l			Change	Addition
STREET ADDRESS			STRE	EET ADDRESS				
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								
SIGNATURE: 1/17/08 813-503-7616 SIGNATURE: Date Disputs Phone #								