

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710915

FILED
Jan 09, 2009
Secretary of State

Entity Name: TITUSVILLE RIFLE AND PISTOL CLUB, INC.

Current Principal Place of Business:

2299 HATBILL ROAD
PO BOX 6482
TITUSVILLE, FL 327826482

New Principal Place of Business:

2299 HATBILL ROAD
MIMS, FL 32754

Current Mailing Address:

2299 HATBILL ROAD
PO BOX 6482
TITUSVILLE, FL 327826482

New Mailing Address:

P.O.BOX 314
MIMS, FL 32754

FEI Number: 59-2924740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROADWELL, RAY C
4485 BURKHOLM RD.
MIMS, FL 32754 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: D () Delete
Name: BAKER, CRAIG
Address: 515 N CARPENTER RD
City-St-Zip: TITUSVILLE, FL 32796

Title: T () Delete
Name: BROADWELL, RAY
Address: 4485 BURKHOLM RD
City-St-Zip: MIMS, FL 32754

Title: P () Delete
Name: SUGGS, TOMMIE
Address: 3240 TEAL ST
City-St-Zip: TITUSVILLE, FL 32796

Title: D () Delete
Name: PARISO, GEORGE,
Address: 4048 GRANTLINE RD
City-St-Zip: MIMS, FL 32754

Title: V () Delete
Name: LOVELAND, DEAN
Address: 2551 WESTMINISTER TERR.
City-St-Zip: OVIEDO, FL 32756

Title: S () Delete
Name: SUGGS, MICHELLE
Address: 3240 TEAL ST.
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: KLINE, GERALD
Address: 7098 BAYFRONT RD.
City-St-Zip: COCOA, FL 32927

Title: V (X) Change () Addition
Name: PARISO, GEORGE,
Address: 4048 GRANTLINE RD
City-St-Zip: MIMS, FL 32754

Title: D (X) Change () Addition
Name: BROOKS, GIL
Address: 1505 JUSTIN COURT
City-St-Zip: TITUSVILLE, FL 32796

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

I hereby certify that the information supplied with this filing does not qualify 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: RAY BROADWELL

T

01/09/2009

Electronic Signature of Signing Officer or Director

Date