

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711146

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** DELTONA SPORTSMEN'S CLUB, INC.

**Current Principal Place of Business:**

985 E. GAUCHO CIR.  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6058  
DELTONA, FL 32728

**New Mailing Address:**

P.O. BOX 6022  
DELTONA, FL 32728

**FEI Number:** 71-1146740 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ALLEN, RICHARD C SR.  
938 CLOVERLEAF BLVD.  
DELTONA, FL 32725 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: T ( ) Delete  
Name: ALLEN, RICHARD C JR.  
Address: 773 ADLER DR.  
City-St-Zip: DELTONA, FL 32738

Title: P ( ) Delete  
Name: ALLEN, RICHARD C SR.  
Address: 938 CLOVERLEAF BLVD  
City-St-Zip: DELTONA, FL 32725

Title: S ( ) Delete  
Name: BRODA, CLINT  
Address: 3205 HALLAM ST.  
City-St-Zip: DELTONA, FL 32738

Title: VP ( ) Delete  
Name: HULETTE, CRAIG  
Address: 465 HIDDEN RIDGE DR.  
City-St-Zip: DELTONA, FL 32725

Title: D ( ) Delete  
Name: ALLEN, TROY D  
Address: 2049 E. ATMORE CIR.  
City-St-Zip: DELTONA, FL 32725

Title: D (X) Delete  
Name: COAKLEY, WILLIAM  
Address: 1021 HANFORD DR.  
City-St-Zip: DELTONA, FL 32738

**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 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: RICHARD C. ALLEN

P

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date