

2001 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 03, 2001 8:00 am
Secretary of State

03-29-2001 90407 016 ****61.25

DOCUMENT # 715309

1. Entity Name

LAKELAND RIFLE AND PISTOL CLUB, INC.

Principal Place of Business

Mailing Address

2000 LASSO LN
 LAKELAND FL 33801

2000 LASSO LN
 LAKELAND FL 33801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2258200

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHULTZ, RONALD D.
 2000 LASSO LN
 LAKELAND FL 33801

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: SD
 NAME: SHULTZ, LOIS
 STREET ADDRESS: 1827 TRISTAM
 CITY-ST-ZIP: LAKELAND FL
 SECRETARY Delete

TITLE: Change Addition

TITLE: TD
 NAME: KEAR, RALPH
 STREET ADDRESS: 1844 BEDIVERE
 CITY-ST-ZIP: LAKELAND FL
 TREASURER Delete

TITLE: Change Addition

TITLE: EVO
 NAME: SUETTERLIN, RICHARD
 STREET ADDRESS: 4827 ARLINGTON PARK DR
 CITY-ST-ZIP: LAKELAND FL 33801
 PRESIDENT Delete

TITLE: Change Addition

TITLE: VD
 NAME: CHIARIELLO, DAN
 STREET ADDRESS: 1311 GLEN FORD LANE
 CITY-ST-ZIP: LAKELAND FL 33813
 Delete

TITLE: VD
 NAME: DON SHARP
 STREET ADDRESS: 241 BIRD AVE
 CITY-ST-ZIP: LAKELAND FL 33815
 VICE PRESIDENT Change Addition

TITLE: Delete

TITLE: Change Addition

TITLE: Delete

TITLE: Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *[Signature]*

3-26-01 863-665-0092

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2007 (10/00)