## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#715309** 

**FILED** Apr 15, 2009 Secretary of State

Entity Name: LAKELAND RIFLE AND PISTOL CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2000 LASSO LN LAKELAND, FL 33801

**Current Mailing Address: New Mailing Address:** 

2000 LASSO LN LAKELAND, FL 33801

FEI Number: 59-2258200 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SHULTZ, RONALD D. 2000 LASSO LN

LAKELAND, FL 33801 US

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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BRELAND, DAVE SYVERSEN, JOHN Name: Name: 6725 ENGLELAKE DR Address: 56 ODESSA DR Address:

City-St-Zip: LAKELAND, FL 33813 City-St-Zip: WINTER HAVEN, FL 33880

Title: **VDVP** Title:

() Delete (X) Change ( ) Addition SYVERSEN, JOHN M Name: JARDINE, KENNETH J Name:

Address: 56 ODESSA DR Address: 5538 HIGHLANDS VISTA CIRCLE

City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: LAKELAND, FL 33812

( ) Delete Title: Title: () Change () Addition

LEE, DANNY Name: Name: Address: P O BOX 2571 Address: City-St-Zip: LAKELAND, FL 33806 City-St-Zip:

( ) Delete Title: SD Title: () Change () Addition

SHULTZ, LOIS Name: Name: Address: 1827 TRISTRAM Address: City-St-Zip: LAKELAND, FL 33813 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: JOHN SYVERSEN PS 04/15/2009