## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## **DOCUMENT #717725** 1. Entity Name FILFD ASBÚRY ARMS, INC. 08 JUN 12 PH 12: 00 Principal Place of Business Mailing Address CONTIANT OF STATE 1430 DIXON BLVD. 1430 DIXON BLVD. FALL AHASSEE, FLORIDA COCOA, FL 32922 COCOA, FL 32922 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06052008 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 23-7070334 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WOOTEN, LELAND W JR. 670 NORTH COURTENAY PKWY Street Address (P.O. Box Number is Not Acceptable) MERRITT ISLAND, FL 32953 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. I am familiar with, and accept the obligations of registered agent. 600131282306 06/13/08--01025--003 \*\*61 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. SH VP TITLE Delete TITLE Channe Addition William R. Winner IVEY, WADE NAME NAME 1002 Barton Blud STREET ADDRESS STREET ADDRESS 275 EAGLE LANE CITY-ST-ZIP Rockledge FL 32955 MERRIT ISLAND, FL 32957 CITY-ST-7IP Secretary D TITLE Delete TITLE Change Addition Sandra B. Patrick MCGAFFIC, DAVE REV NAME NAME 1816 Tulane Dr. STREET ADDRESS 3 N. HARDEE CIRCLE STREET ADDRESS Cocoa, FL 32926 CITY-ST-ZIP ROCKLEDGE, FL 32955 CITY-ST-ZIP D Zm VP TITLE **⊠** Delete TITLE [: | Change Addition Carl C Russell NAME RUSSELL, CARL C NAME 1002 BARTON BLVD 1493 Rockledge Dr. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROCKLEDGE, FL 32955 CITY-ST-78 Rockledge, FL 32955-3719 Director TITLE Addition TITLE Delete 🗆 ☐ Change Rev. Gene YOHKa NAME LARRABEE, CARL NAME PO BOX 266 STREET ADDRESS 2622 HORSESHOE CT. STREET ADDRESS Cocoa, FL 32922 CITY-ST-ZIP COCOA, FL 32926 CITY-ST-ZIP Director TITLE **⊠** Delete TITLE ☐ Chance ✓ Addition Nancy Dean 4420 Hartville Ave WILSON, HAROLD ... NAME NAME 4420 Hartville Cocoa, FL 32926 STREET ADDRESS 16 BONAVENTURE CT. STREET ADDRESS CITY-ST-ZIP ROCKLEDGE, FL 32955 CITY-ST-ZIP Director TITLE Delete TITLE ☐ Change Addition GIEL, BARBARA R David Norton NAME NAME 1925 Lazy Lanc STREET ADDRESS 200 MARLIN DR STREET ADDRESS CITY-ST-ZIP MERRITT ISLAND, FL 32952 CITY-ST-7/P Cocoa, FE 32926 12. I hereby certify that the information supplied with this filing 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

Sandra Patrick

## Addition

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Director Harold L. Wilson POBOX 334 Sharpes, FL 32952

Director Leland W. Wooten, Jr. 2167 Hedgerow Dr. Merritt Island, FL 32953