

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736204

FILED
Apr 23, 2008
Secretary of State

Entity Name: FLORIDA SKEET ASSOCIATION, INC.

Current Principal Place of Business:

C/O B. MURRAY TUCKER, JR.
400 CR 468
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

C/O B. MURRAY TUCKER, JR.
P.O. BOX 492810
LEESBURG, FL 347492810

New Mailing Address:

FEI Number: 59-2870307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKER, CHARLES
6870 SUNNYSIDE DR
LEESBURG, FL 34748 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: P () Delete
Name: JONES, TOM
Address: 6530 TUSCAWILLA DRIVE
City-St-Zip: LEESBURG, FL 34748

Title: ST () Delete
Name: TUCKER JR, B M
Address: P.O. BOX 492810
City-St-Zip: LEESBURG, FL 34749

Title: D () Delete
Name: LAUSE, TOM
Address: 19680 NORTH RIVER RD
City-St-Zip: ALVA, FL 33920

Title: ST () Delete
Name: TUCKER, CHARLES
Address: 6870 SUNNYSIDE DR
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: FERTIG, WILLIAM
Address: 352 COLLEGE DR
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete
Name: KETH, KEN
Address: 517 WHISPER WOOD DR
City-St-Zip: LONGWOOD, FL 32779

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
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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: CHARLES B. TUCKER

ST

04/23/2008

Electronic Signature of Signing Officer or Director

Date