

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736532

FILED
Mar 02, 2009
Secretary of State

Entity Name: SUNSHINE GUN CLUB, INC.

Current Principal Place of Business:

895 SW 34TH TERRACE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

895 SW 34TH TERRACE
PALM CITY, FL 34990 US

New Mailing Address:

905 SE FLAMINGO AVE.
STUART, FL 34996 US

FEI Number: 59-1678907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN VONNO, FRED W
3473 SE WILLOUGHBY BOULEVARD
STUART, FL 34994 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: HATAWAY, BILL D
Address: 895 S.W. 34TH TERRACE
City-St-Zip: PALM CITY, FL 34990

Title: V () Delete
Name: FERGUSON, WILLIAM
Address: 8404 S.E. WOODMERE ST.
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: FOGEL, MARVIN
Address: 3731 SW SPOONBILL TERRACE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: TRAYLOR, EDWARD M
Address: 905 SE FLAMINGO AVENUE
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: MYERS, ROBERT M
Address: 2408 S.W. DAMFORTH CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: JORDAN, PETER
Address: 2578 S.E. BLACKWELL DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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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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: EDWARD M. TRAYLOR

S/T

03/02/2009

Electronic Signature of Signing Officer or Director

Date