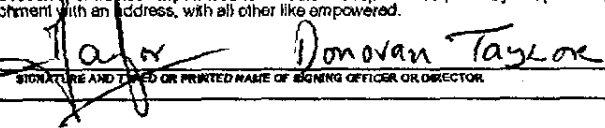


FILED
Apr 12, 2006 08:00 AM
Secretary of State

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 741436		
1. Entity Name THE HOLLYWOOD RIFLE AND PISTOL CLUB, INC.		
Principal Place of Business 2989 STIRLING ROAD DANIA BEACH, FL 33312		Mailing Address 2989 STIRLING ROAD DANIA BEACH, FL 33312
DO NOT WRITE IN THIS SPACE		
		 04062006 No Chg-NP CF2E037 (11/05)
4. FEI Number 59-6181828		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
DILLON, LINDA 712 NE 115 STREET BISCAYNE PARK, FL 33161		DO NOT WRITE IN THIS SPACE
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.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD TOSTO, VINCENT 9021 SW 53 STREET COOPER CITY, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD TAYLOR, DONAVAN 8778 SUNSET STRIP SUNRISE, FL 33313	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD DILLON, LINDA 712 N.E. 115 STREET BISCAYNE PARK, FL 331616354	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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:  Donovan Taylor		4/06/06 954-744-4422
SIGNATURE AND TITLED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #