## 2002 UNIFORM BUSINESS REPORT (UBR) **FILED** May 20, 2002 8:00 am Secretary of State **DOCUMENT # 761221** SARASOTA GUN CLUB, INC. 05-20-2002 90013 018 \*\*\*\*61.25 Mailing Address Principal Place of Business KNIGHT TRL PK. RUSTIC.RD. LAUREL. FL KNIGHT TRL PK. RUSTIC.RD. LAUREL. FL P. O. BOX 802 P. O. BOX 802 NOKOMIS FL 34274-0802 NOKOMIS FL 34274-0802 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State 59-1916803 City & State Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Zip Country Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Robert Calderone Street Address (P.O. Box Number is Not Acceptable) SHAKARJIAN, CARNIE C SR 373 SUGAR MILL DRIVE 3322 Sheffield Cir OSPREY FL 34229 ana sota 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 Caldrell SIGNATURE (NOTE: Registered Agent signature required when reinstating Make Check Payable to **\$5.00** May Be Election Campaign Financing FILE NOW: FEE IS \$61.25 Department of State П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change TITLE ☐ Delete TIRE CALDERONE, R NAME NAME 3322 SHEFFIELD CIRCLE STREET ADDRESS STREET ADDRESS SARASOTA FL 34239 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TD TD Delete TITLE TITLE Blair Weinstock 1103 wild Citrus Lane BALDERONE, BECKY NAME NAME 3322 SHEFFIELD CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SALASOLA, FI 34Z40 SARASOTA FL 34239 CITY-ST-ZIP ☐ Change Addition SD TITLE Delete TITLE RADK-Swainson SHAKARJIAN, CARNIG C-NAME NAME 7211 st. Johns WAY STREET ADDRESS 273 SUGAR MILL DRIVE STREET ADDRESS university Park. FL. CITY-ST-ZIP OSPREY FL 34229 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE **VOSNOS, WILLIAM** NAME NAME 6935 CUMBERLAND TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP UNIVERSITY PARK FL 34201 CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [] Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 chapted or no an attempt with an odd cross with all other like oppositions.

Davtime Phone #

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: