

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000105249

**FILED  
Jan 11, 2010  
Secretary of State**

**Entity Name:** MASTERS FIREARMS TRAINING AND TECHNIQUES LLC

**Current Principal Place of Business:**

1315 SW 1ST CT  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

3965 COCOPLUM CIRCLE  
SUITE E  
COCONUT VREEK, FL 33063

**New Mailing Address:**

FEI Number: 27-1236955      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HERSH, JASON E  
3965 COCOPLUM CIRCLE  
SUITE E  
COCONUT CREEK, FL 33063 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: NISTICO, SCOTT A  
Address: 3965 COCOPLUM CIRCLE SUITE E  
City-St-Zip: COCONUT CREEK, FL 33063

Title: MGRM  
Name: HERSH, JASON E  
Address: 3965 COCOPLUM CIRCLE SUITE E  
City-St-Zip: COCONUT CREEK, FL 33063

Title: MGRM  
Name: BIGWOOD, JAMES  
Address: 3947 NW 1ST DRIVE  
City-St-Zip: DEERFIELD BEACH, FL 33442

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JASON HERSH

MGRM

01/11/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date