# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 23, 2012**
**Secretary of State**

DOCUMENT# L11000017953

**Entity Name:** MCT SHOOTING ACADEMY, LLC

**Current Principal Place of Business:**

814 CARLTON COURT
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2201
EAGLE LAKE, FL 33839

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

MOTT, JAMES D
814 CARLTON COURT
WINTER HAVEN, FL 33884 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: MOTT, JAMES D
Address: 814 CARLTON COURT
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGRM
Name: MOTT, LISA S
Address: 814 CARLTON COURT
City-St-Zip: WINTER HAVEN, FL 33884

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 Statues.

SIGNATURE: JAMES MOTT MGRM 01/23/2012

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