

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003135

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: AMERICAN SNIPER ASSOCIATION, INC.

## Current Principal Place of Business:

6232 APPLE RD  
SEBRING, FL 33875 US

## New Principal Place of Business:

## Current Mailing Address:

6232 APPLE RD  
SEBRING, FL 33875 US

## New Mailing Address:

FEI Number: 65-1000748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARTLETT, JULIE A  
6232 APPLE RD  
SEBRING, FL 33875 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: D ( ) Delete  
Name: BARTLETT, DERRICK D  
Address: 6232 APPLE RD  
City-St-Zip: SEBRING, FL 33875 US

Title: D ( ) Delete  
Name: GROSS, EDWARD  
Address: 260 HURRICANE RD  
City-St-Zip: KEENE, NH 03431 US

Title: D ( ) Delete  
Name: LEWIS, ROBERT  
Address: 3301 E TAMiami TRAIL  
City-St-Zip: NAPLES, FL 34112 US

Title: D ( ) Delete  
Name: MOREY, RICHARD D  
Address: 600 W COLLEGE DR  
City-St-Zip: AVON PARK, FL 33825 US

Title: D ( ) Delete  
Name: SAIN, BRIAN K  
Address: 2735 UPTON DRIVE  
City-St-Zip: PORT ARTHUR, TX 77642 US

## 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  
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: DERRICK D. BARTLETT

D

03/20/2009

Electronic Signature of Signing Officer or Director

Date