FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

APPROVED AND FILED

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1995 MAR 14 PM 12:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01930 (9)

1. Corporation Name

CENTRAL FLORIDA PRACTICAL SHOOTING ASSOCIATION, INC.

900001431399
-03/16/95--01055--008
****130.00 ****130.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
6823 THOUSAND OAKS RD ORLANDO FL 32818 US	P O BOX 680751 ORLANDO FL 32868 US

3. Date Incorporated or Qualified: 03/13/1984
3a. Date of Last Report: 04/13/1994
4. FEI Number: 59-2385227 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24 Country — 25
Zip — 29 Country — 30

9. Name and Address of Current Registered Agent

HUMPHREY, CHARLES
6823 THOUSAND OAKS RD
ORLANDO FL 32828

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
900001431399
-03/16/95--01055--008
83
84 City ****70.00 FL 85 Zip Code ****70.00

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Charles Humphrey 2/28/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	DAWSON, DAVE	1.2 NAME	HAMARA, Tom
STREET ADDRESS	1791 C SOUTH ORANGE BLOSSOM TRAIL	1.3 STREET ADDRESS	6540 Haughton Ln.
CITY-ST-ZIP	APOPKA FL	1.4 CITY-ST-ZIP	ORLANDO, FL 32835
TITLE	DVP	2.1 TITLE	DVP ☒ Change ☐ Addition
NAME	CASSIDY, KEN	2.2 NAME	Powell, Greg
STREET ADDRESS	1819 E GLANCY	2.3 STREET ADDRESS	5703 Fernhill Dr
CITY-ST-ZIP	DELTONA FL 32725	2.4 CITY-ST-ZIP	ORLANDO, FL 32808
TITLE	DTS	3.1 TITLE	DTS ☐ Change ☐ Addition
NAME	HUMPHREY, CHARLES	3.2 NAME	~~Charles~~ Charles Humphrey
STREET ADDRESS	6823 THOUSAND OAKS RD	3.3 STREET ADDRESS	6823 Thousand Oaks Rd
CITY-ST-ZIP	ORLANDO FL 32818	3.4 CITY-ST-ZIP	ORLANDO, FL 32818
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	****130.00 ****130.00
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	JEB
STREET ADDRESS		6.3 STREET ADDRESS	3-14
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Charles Humphrey Charles Humphrey 2/28/95 4072927884
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0038082