

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 31, 2009
Secretary of State**

DOCUMENT# N02660

Entity Name: MARTEL ARMS ASSOCIATION, INC.

Current Principal Place of Business:

1010 NE 8 AVENUE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

1010 NE 8 AVENUE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 59-2449930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EASTON, KELLY
1010 NE 8TH AVE #C15
DELRAY BEACH, FL 33483 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: PD () Delete
Name: VOELLINGER, STEPHEN A
Address: 1010 NE 8TH AVE #16
City-St-Zip: DELRAY BEACH, FL 33483

Title: VD () Delete
Name: FAHERTY, PATRICK
Address: 1010 NE 8TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD () Delete
Name: KNIGHT, CAROLE
Address: 1010 NE 8TH AVE., #G42
City-St-Zip: DELRAY BEACH, FL 33483

Title: T () Delete
Name: EASTON, KELLY
Address: 1010 NE 8TH AVE #C15
City-St-Zip: DELRAY BEACH, FL 33483

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:

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: KELLY EASTON

T

03/31/2009

Electronic Signature of Signing Officer or Director

Date