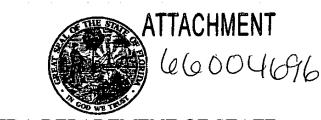
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE AND TYPED OR PRINTED HAME OF SI

Mar 13, 2006 8:00 am **Secretary of State** DOCUMENT # N05000009213 1. Entity Name 02-22-2006 90014 004 ****61.25 CALOOSA SPORTS SHOOTERS, INC. Mailing Address Principal Place of Business 1840 PHILLIPS RD 1840 PHILLIPS RD ALVA FL 33920 US ALVA FL 33920 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) 4. FEI Number 2005 - 09 - 6 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KUNTZ, EDWARD Street Address (P.O. Box Number is Not Acceptable) 1840 PHILLIPS RD ALVA FL 33920 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed organized name of registered agent and real applicable (NOTE Routstand Agent agreeting required when retriesting) FILE NOW: FEE IS \$61.25 Due By May I 2006 OFFICERS AND DIRECTORS Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. NTLE TITLE Oelele ☐ Change ☐ Addition KUNTZ, EDWARD NAME NAME STREET ADDRESS 1840 PHILLIPS RD STREET ADDRESS ALVA FL 33920 CITY ST-ZIP CITY-ST-ZIP TITLE ☐ Change Oelete TITLE ☐ Add:tion ALEXANDER, DAVE NAME NAME STREET ADDRESS 233 NORTH BRIDGE STREET STREET ADDRESS LABELLE FL 33935 CITY-ST-ZIP CITY-ST-ZIP mj ☐ Addition NAME KUNTZ, DIANE. NAME STREET ADORESS 1840 PHILLIPS RD STREET ADDRESS CfTY - S7 - Z:P **ALVA FL 33920** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP MLE ☐ Defete TITLE Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered. 2-1074-06 SIGNATURE:

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2006

CALOOSA SPORTS SHOOTERS, INC. 1840 PHILLIPS RD ALVA, FL 33920 US

Subject: CALOOSA SPORTS SHOOTERS, INC.

Reference Number:

N05000009213

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION