2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009213

City-St-Zip:

ALVA, FL 33920 US

FILED Apr 29, 2009 Secretary of State

Entity Nar	ne: CALOOSA SP	ORTS SHOOTERS, INC.		•	
Current Principal Place of Business:			New Principal Plac	ce of Business:	
1840 PHILI ALVA, FL					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O.BOX 4 LABELLE,					
FEI Number:		Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	LIPS RD 33920 US	its this statement for the p	urpose of changing its registe	red office or registered agent, or both,	
SIGNATUR		gnature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delet KUNTZ, EDWARD 1840 PHILLIPS RD ALVA, FL 33920 US	e	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delet ALEXANDER, DAVE 233 NORTH BRIDGE LABELLE, FL 33935	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S T () Delet KUNTZ, DIANE 1840 PHILLIPS RD	е	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: DAVE ALEXANDER VΡ 04/29/2009