

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011471

FILED  
Apr 10, 2010  
Secretary of State

**Entity Name:** POPS GUN CLUB, INC.

**Current Principal Place of Business:**

6101 US HIGHWAY 27  
SOUTHWEST RANCHES, FL 33332

**New Principal Place of Business:**

**Current Mailing Address:**

6101 US HIGHWAY 27  
SOUTHWEST RANCHES, FL 33332

**New Mailing Address:**

**FEI Number:** 26-3957268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FILINGS, INC.  
3732 N.W. 16TH STREET  
FORT LAUDERDALE, FL 33311 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: PTD  
Name: GLASS, SHARON  
Address: 6101 US HIGHWAY 27  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: VPD  
Name: PATLAK, DANIEL B  
Address: 5272 SW 94 AVENUE  
City-St-Zip: COOPER CITY, FL 33328

Title: TD  
Name: LARA, MICHAEL  
Address: 345 NW 45 TERRACE  
City-St-Zip: DEERFIELD BCH, FL 33442

Title: SD  
Name: BROADBENT, ROBERT  
Address: 7301 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33314

Title: D  
Name: CORTES, JULIO  
Address: 15160 SW 136 STREET  
City-St-Zip: MIAMI, FL 33196

Title: D  
Name: KLEIN, SUZAN  
Address: 4501 SW 42 AVENUE  
City-St-Zip: DANIA, FL 33314

I hereby 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 all other like empowered.

SIGNATURE: SHARON I GLASS

PD

04/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date