2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

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Entity Name: SAFETY AND FIREARMS EDUCATION OF FLORIDA, INC.

Current Principal Place of Business:

6954 ALOMA AVENUE
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

6954 ALOMA AVENUE
WINTER PARK, FL 32792 US

New Mailing Address:

FEI Number: 27-3722467 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOTSCHALL, MICHAEL H ESQ.
931 S. SEMORAN BLVD.
STE. 202
WINTER PARK, FL 32792 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: P
Name: YEAGER, CHUCK
Address: 6954 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: S
Name: CLARKE, SCOTT D
Address: 6954 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: T
Name: ARBLASTER, ROBERT K
Address: 6954 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP
Name: GOTSCHALL, MIKE
Address: 6954 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP
Name: MAGALDINO, BEN
Address: 6954 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

Title: VP
Name: FROSCHER, JOHN
Address: 6954 ALOMA AVENUE
City-St-Zip: WINTER PARK, FL 32792 US

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: R. KENT ARBLASTER T 04/20/2011

Electronic Signature of Signing Officer or Director — Date