## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13841

Jul 11, 2007 Secretary of State

Entity Name: JACKSONVILLE SKEET AND TRAP CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 12125 NEW BERLIN RD JACKSONVILLE, FL 32226 **Current Mailing Address: New Mailing Address:** 233 E. BAY STRET SUITE 720 12125 NEW BERLIN RD JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32202 FEI Number: 59-6151255 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAWRENCE, ROLFE C LAWRENCE, ROLFE C 233 E. BAY ST. 233 E. BAY ST. JACKSONVILLE, FL 32202 US SUITE 720 JACKSONVILLE, FL 32202 US 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: 07/11/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RAIZIS, RON Name: Name: Address: 7313 TAHITI RD Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CHILDERS, GARY Name: Address: 12125 NEW BERLIN RD Address: City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition THOMAS, JOHN Name: THOMAS, JOHN Name: 4859 MAYWOOD DR 4859 MAYWOOD DR Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32277 Title: () Delete Title: (X) Change ( ) Addition REINSTINE, FRANK Name: HITZIG, KATHERINE Name: 1252 TIBER AVE Address: 7778 LAS PALMAS WAY Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32207 Title: () Delete Title: ( ) Change (X) Addition ROLFE, LAWRENCE Name: Name: 233 E. BAY ST Address: Address: JACKSONVILLE, FL 32202 City-St-Zip: 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: LAWRENCE C. ROLFE DRA 07/11/2007