

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25243

FILED
Apr 07, 2009
Secretary of State

Entity Name: PHOENIX GUN CLUB, INC.

Current Principal Place of Business:

23451 MONDON HILL ROAD
BROOKSVILLE, FL 34601 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10432
BROOKSVILLE, FL 346030432 US

New Mailing Address:

FEI Number: 59-2899736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINETTO, COSIMO R
25273 ASH STREET
BROOKSVILLE, FL 34601 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: DV () Delete
Name: MARTINETTO, COSIMO R
Address: 25273 ASH STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: DT () Delete
Name: SWEENEY, HAROLD D
Address: 25373 LADYHAWK LANE
City-St-Zip: BROOKSVILLE, FL 34601

Title: DS () Delete
Name: MCFARLANE, JOHN W
Address: 427 HOWELL AVENUE
City-St-Zip: BROOKSVILLE, FL 34601

Title: DP () Delete
Name: MAZZATTA, MICHAEL JR.
Address: 14699 LINDEN DR
City-St-Zip: SPRING HILL, FL 34609

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARTINETTO, COSIMO R
Address: 25273 ASH STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: MCFARLANE, JOHN W
Address: 427 HOWELL AVENUE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D (X) Change () Addition
Name: MAZZATTA, MICHAEL JR.
Address: 14699 LINDEN DR
City-St-Zip: SPRING HILL, FL 34609

Title: DV () Change (X) Addition
Name: HARECHMAK, KENNETH
Address: 12004 CAVERN RD
City-St-Zip: SPRING HILL, FL 34609

Title: DS () Change (X) Addition
Name: HOFF, ROBERT
Address: 9309 HAPPY TRAIL
City-St-Zip: BROOKSVILLE, FL 34601

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: HAROLD D SWEENEY

DT

04/07/2009

Electronic Signature of Signing Officer or Director

Date