

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 07 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26274 (3)

1. Corporation Name

MANATEE RIVER LONG RIFLES, INC.

Principal Place of Business

Mailing Address

4030 LANCASTER DRIVE
SARASOTA FL 342414030 LANCASTER DRIVE
SARASOTA FL 34241-58193. Date Incorporated or Qualified
05/04/19883a. Date of Last Report
04/05/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida StatutesYes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 4141 Carlton Inlet Dr

26 4141 Carlton Inlet Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Bradenton FL

28 Bradenton FL

Zip

Country

24 34208

25 USA

Zip

Country

29 34208

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEIPOLD, PAUL
4030 LANCASTER DRIVE
SARASOTA FL 34241

81 Name

Susan Dougherty

82 Street Address (P.O. Box Number is Not Acceptable)

4141 Carlton Inlet Drive

83

84 City

Bradenton

FL

85 Zip Code
34208

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Susan K. Dougherty

(NOTE: Registered Agent signature required when reinstating)

4-1-97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME SHIVELY, GLEN
STREET ADDRESS 3500 HENRIETTA PLACE
CITY-ST-ZIP SARASOTA FL1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Shawn GRADY
1.3 STREET ADDRESS 11986 82nd Avenue North
1.4 CITY-ST-ZIP Seminole, FL 33772TITLE VPD ☐ DELETE
NAME DEFOUW, ROGER
STREET ADDRESS 1397 43RD ST.
CITY-ST-ZIP SARASOTA FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE ST ☒ DELETE
NAME LEIPOLD, PAUL
STREET ADDRESS 4030 LANCASTER DRIVE
CITY-ST-ZIP SARASOTA FL 342413.1 TITLE ST ☒ Change ☐ Addition
3.2 NAME Susan Dougherty
3.3 STREET ADDRESS 4141 Carlton Inlet Drive
3.4 CITY-ST-ZIP BRADENTON FL 34208TITLE D ☒ DELETE
NAME WYNNE, MICHAEL
STREET ADDRESS 2901 LYNN HURST STREET
CITY-ST-ZIP SARASOTA FL 342394.1 TITLE PAHmentarian ☒ Change ☐ Addition
4.2 NAME GREG Penney
4.3 STREET ADDRESS 6913 Tema Lane
4.4 CITY-ST-ZIP Sarasota FL 34241TITLE D ☒ DELETE
NAME HICKS, BILL
STREET ADDRESS 6504 SHADOWBORR DR. E.
CITY-ST-ZIP LAKELAND FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan K. Dougherty 3-21-97

941-747-9547

CR2E037 (9/96)