

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27556

FILED
Jan 13, 2009
Secretary of State

Entity Name: SOUTHWEST FLORIDA SPORTSMAN'S ASSOCIATION, INC.

Current Principal Place of Business:

1721 SW 6TH AVENUE
CAPE CORAL, FL 33991 LE

New Principal Place of Business:

Current Mailing Address:

P O BOX 100691
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 65-0086520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMPE, LEE A
1721 SW 6TH AVE
CAPE CORAL, FL 33991 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: PDC () Delete
Name: HAMPE, LEE A
Address: 1721 SW 6TH AVE
City-St-Zip: CAPE CORAL, FL 33991

Title: VP () Delete
Name: SARDI, BILL
Address: 1102 SE 31ST TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: SD () Delete
Name: FRITZ, CHARLES
Address: 3617 SE 2ND AVE
City-St-Zip: CAPE CORAL, FL 33904

Title: T () Delete
Name: GARDINER, DAVID
Address: 4238 NW 24TH TERRACE
City-St-Zip: CAPE CORAL, FL 33993

Title: EO () Delete
Name: WHITE, JIM
Address: 12571 COUNTRY EAGLE LANE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: TROTТА, JOHN
Address: 312 SE 18 AVENUE
City-St-Zip: CAPE CORAL, FL 33990

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

Title: T (X) Change () Addition
Name: WHEELER, WAYNE
Address: 1437 SE 28TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: EO (X) Change () Addition
Name: JONES, RON
Address: 331 SE 16TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990

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: CHARLES FRITZ

SD

01/13/2009

Electronic Signature of Signing Officer or Director

Date