

7-30-97 B-8069 C
SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Jul 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000001856 (3)

1. Corporation Name

SOUTH FLORIDA SPORTING CLAYS, INC.



Principal Place of Business

Mailing Address

7181 WILSON ST.
HOLLYWOOD FL 33024
US

7181 WILSON ST.
HOLLYWOOD FL 33024
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1994

3a. Date of Last Report

06/17/1996

4. FEI Number

65-0502282

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 2401 SW 136 Ave

Suite, Apt. #, etc.

22 ~~2401 SW 136 Ave~~

City & State

23 Davie FL

Zip

24 33325

Country

25 Broward

2a. Mailing Address

26 2401 SW 136 Ave

Suite, Apt. #, etc.

27 ~~2401 SW 136 Ave~~

City & State

28 Davie FL

Zip

29 33325

Country

30 Broward

9. Name and Address of Current Registered Agent

LAMBERTUS, ARTHUR W
2929 E. COMMERCIAL BLVD.
SUITE 604
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DU QUESNAY, BRIAN
STREET ADDRESS 13241 STERLING RD.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME MARSHALL, ALAN
STREET ADDRESS 9743 NW 42ND CT.
CITY-ST-ZIP SUNRISE FL

TITLE ☐ DELETE

NAME OLIVER, ROBERT
STREET ADDRESS 8101 SW 53RD ST.
CITY-ST-ZIP MIAMI FL

TITLE ☒ DELETE

NAME CROSS, THERESA
STREET ADDRESS 7181 WILSON ST.
CITY-ST-ZIP HOLLYWOOD FL

TITLE ☐ DELETE

NAME RONALD CARDETT
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Director
Ron CADONETTE
2401 SW 136 Ave
Davie FL 33325

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 REQUIRED *[Signature]* 7/30/97 2:54 PM 4570

CR2E037 (4/97)