

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000003230 (8)

1. Corporation Name

THE TREASURE ISLAND PISTOL CLUB, INC.



Principal Place of Business

10110 YACHT CLUB DRIVE
TREASURE ISLAND FL 33706

Mailing Address

10110 YACHT CLUB DRIVE
TREASURE ISLAND FL 33706

3. Date Incorporated or Qualified
07/05/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

☒ 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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CUSSON, RALPH
10110 YACHT CLUB DRIVE
TREASURE ISLAND FL 33706

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 D ☒ DELETE
NAME KOHUT, ANDY
STREET ADDRESS 408 SANDY HOOK RD
CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE D ☐ DELETE
NAME CUSSON, RALPH W
STREET ADDRESS 10110 YACHT CLUB DRIVE
CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE D ☒ DELETE
NAME ANDREWS, GREGORY F
STREET ADDRESS 172 MAR STREET
CITY-ST-ZIP ST. PETERSBURG BEACH FL 33706

TITLE D ☐ DELETE
NAME STEVENS, ED JR
STREET ADDRESS 5940 BIMINI WAY NO
CITY-ST-ZIP ST. PETERSBURG BEACH FL 33706

TITLE ☐ DELETE
NAME
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 D & P ☒ Change ☐ Addition
1.2 NAME ~~THOMAS~~ JOHN I. ADAMS
1.3 STREET ADDRESS 21 ISLAND DRIVE
1.4 CITY-ST-ZIP TREASURE ISLAND, FL 33706

2.1 TITLE D, S, T ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS } SAME
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS "NO REPLACEMENT"
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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

R. W. Cusson

RALPH W. CUSSON, SECY TREAS.

4/1/96

813-381-2000

EXT 4042

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)