

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003576

FILED
Jan 09, 2009
Secretary of State

Entity Name: WEST FLORIDA PRACTICAL SHOOTERS, INC.

Current Principal Place of Business:

2559 AUGUSTUS DR.
MARIANNA, FL 32448

New Principal Place of Business:

Current Mailing Address:

2559 AUGUSTUS DR.
MARIANNA, FL 32448

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVER, JAMES R
2807 JEFFERSON ST.
MARIANNA, FL 32448 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: PD () Delete
Name: PARTIN, JAMES R
Address: 2973 MARIDALE RD
City-St-Zip: MARIANNA, FL 32448

Title: VPD () Delete
Name: ALLEN, WILLIAM J
Address: P.O. BOX 5769
City-St-Zip: MARIANNA, FL 324475769

Title: STD () Delete
Name: OLIVER, JAMES R
Address: 2559 AUGUSTUS DR
City-St-Zip: MARIANNA, FL 32448

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JAMES R OLIVER

SEC

01/09/2009

Electronic Signature of Signing Officer or Director

Date