

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001323

FILED
Mar 06, 2006
Secretary of State

Entity Name: TRI-STATE ARCHERS, INC.

Current Principal Place of Business:

1541 YEARLING TRAIL
TALLAHASSEE, FL 323119539

New Principal Place of Business:

1541 YEARLING TRAIL
TALLAHASSEE, FL 323178539

Current Mailing Address:

1541 YEARLING TRAIL
TALLAHASSEE, FL 323119539

New Mailing Address:

1541 YEARLING TRAIL
TALLAHASSEE, FL 323178539

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATKINSON, DEBORAH S
1541 YEARLING TRAIL
TALLAHASSEE, FL 323119539 US

Name and Address of New Registered Agent:

ATKINSON, DEBORAH S
1541 YEARLING TRAIL
TALLAHASSEE, FL 323178539 US

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:

03/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AUSTIN, OLIVER L III
Address: POST OFFICE BOX 907
City-St-Zip: TALLAHASSEE, FL 323020907

Title: STD () Delete
Name: ATKINSON, DEBORAH S
Address: 1541 YEARLING TRAIL
City-St-Zip: TALLAHASSEE, FL 323119539

Title: D () Delete
Name: AUSTIN, TIMOTHY O
Address: 1710 SW 76 TERR
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: ATKINSON, DEBORAH S
Address: 1541 YEARLING TRAIL
City-St-Zip: TALLAHASSEE, FL 323178539

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH S. ATKINSON

STD

03/06/2006

Electronic Signature of Signing Officer or Director

Date