

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006218

1. Entity Name

FIRST COAST SPORT SHOOTING ASSOCIATION, INC.

FILED
Feb 06, 2002 8:00 am
Secretary of State

02-06-2002 90047 050 ****61.25

Principal Place of Business

4141 SOUTHPOINT DRIVE EAST SUITE 200
JACKSONVILLE FL 32216-8061
US

Mailing Address

4141 SOUTHPOINT DRIVE EAST SUITE 200
JACKSONVILLE FL 32216-8061
US

2. Principal Place of Business

7373 S. Baker Ave
Suite, Apt. #, etc.

3. Mailing Address

7373 S. Baker Ave
Suite, Apt. #, etc.

City & State

Floral City, FL

City & State

Floral City, FL

4. FEI Number

59-3476079

Applied For

Not Applicable

Zip

34436

Country

Citrus

Zip

34436

Country

Citrus

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VARGAS, CLARK
4141 SOUTHPOINT DRIVE EAST SUITE 200
JACKSONVILLE FL 32216-8061

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME REBMAN, BEN
STREET ADDRESS 8181 BARRACUDA RD
CITY-ST-ZIP JACKSONVILLE FL 32244 ☐ Delete

TITLE SD
NAME ANPANAVICH, PAUL
STREET ADDRESS 2888 HILSDALE HARBOR WAY
CITY-ST-ZIP JACKSONVILLE FL 32216 ☒ Delete

TITLE VD
NAME WATTS, JAMES
STREET ADDRESS 2819 IROQUOIS AVE
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

TITLE VD
NAME VARGAS, CLARK
STREET ADDRESS 4141 SOUTHPOINT DRIVE EAST SUITE 200
CITY-ST-ZIP JACKSONVILLE FL 32216-8061 ☐ Delete

TITLE TD
NAME CARAPELLOTTI, JOE
STREET ADDRESS 9844 BAYOU BLUFF DR
CITY-ST-ZIP JACKSONVILLE FL 32257 ☒ Delete

TITLE SD
NAME ERICKSON, RANDY
STREET ADDRESS 9028 LATIMER RD W
CITY-ST-ZIP JACKSONVILLE FL 32256 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME Dan Rebman
STREET ADDRESS 7373 S. Baker Avenue
CITY-ST-ZIP Floral City, Florida 33436 ☐ Change ☒ Addition

TITLE Secretary
NAME Dan Rebman
STREET ADDRESS 7373 S. Baker Ave
CITY-ST-ZIP Floral City, FL 34436 ☒ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

CR2E037 (9/01)