

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001647

1. Entity Name

DEFENSIVE SHOOTERS FELLOWSHIP OF WEST BROWARD, INC.

Principal Place of Business

Mailing Address

7009 NORTHWEST 73RD AVENUE
TAMARAC FL 33321

7009 NORTHWEST 73RD AVENUE
TAMARAC FL 33321

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

CORAL SPRINGS, FL

Zip

Country

Zip

Country

33071

USA

4. FEI Number

65-0905811

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

WILLIAM GROLL

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

8855 SW 1ST PLACE

City

CORAL SPRINGS

FL

Zip Code

33071

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 fee 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 SPARKS, EDWARD W
STREET ADDRESS 7009 NORTHWEST 73RD AVENUE
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

TITLE VD
NAME KASPRZAK, CHARLES
STREET ADDRESS 3473 PAILIDIAN CIRCLE
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

TITLE STD
NAME GROLL, WILLIAM
STREET ADDRESS 8855 SW 1ST PLACE
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE D
NAME EDLUND, ED
STREET ADDRESS 1720 SW 95TH TERRACE
CITY-ST-ZIP MIRAMAR FL 33025 ☐ Delete

TITLE D
NAME SPEAR, JACK
STREET ADDRESS 7508 SW ED ST
CITY-ST-ZIP POMPANO BEACH FL 33068 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT
NAME JACK SPEAR
STREET ADDRESS 3660 NW 119 AVE
CITY-ST-ZIP SUNRISE FL 33323 ☒ Change ☐ Addition

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

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

TITLE DIRECTOR
NAME ED SPARKS
STREET ADDRESS 7009 NW 73 AVE
CITY-ST-ZIP TAMARAC, FL 33321 ☒ Change ☐ Addition

TITLE DIRECTOR
NAME MARK SLOWINSKI
STREET ADDRESS 2800 N. PALMAIRE DR #409
CITY-ST-ZIP POMPANO BEACH, FL 33069 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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: WILLIAM GROLL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/02

954-345-8382

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90073 043 ****61.25



DO NOT WRITE IN THIS SPACE

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