

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001647

FILED
Feb 10, 2006
Secretary of State

Entity Name: DEFENSIVE SHOOTERS FELLOWSHIP OF WEST BROWARD, INC.

Current Principal Place of Business:

8855 SW 1ST PLACE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

8855 SW 1ST PLACE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-0905811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROLL, WILLIAM
8855 SW 1ST PLACE
CORAL SPRINGS, FL 33071 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: VP () Delete
Name: SPEAR, JACK MR
Address: 3660 NW 119 AVE
City-St-Zip: FORT LAUDERDALE, FL 33323 US

Title: VD () Delete
Name: PHILIP, CROWELL MR
Address: 4250
City-St-Zip: GALT OCEAN DRIVE, FL 33308 US

Title: STD () Delete
Name: GROLL, WILLIAM
Address: 8855 SW 1ST PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: KASPRZAK, CHARLES
Address: 3410 W. HILLSBORO BLVD
City-St-Zip: POMPANO BEACH, FL 33073

Title: PD () Delete
Name: MARK, JACKSON MR
Address: 21531 SO. HERITAGE CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33029 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LEV, BOB DR
Address: 1701 NW 13TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: STD (X) Change () Addition
Name: PHILIP, CROWELL MR
Address: 4250
City-St-Zip: GALT OCEAN DRIVE, FL 33308 US

Title: PD (X) Change () Addition
Name: GROLL, WILLIAM
Address: 8855 SW 1ST PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

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

Title: D (X) Change () Addition
Name: RENEN, KATZ MR
Address: 2375 SW 22 AVE
City-St-Zip: DELRAY BEACH, FL 33445 US

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: WILLIAM GROLL

PD

02/10/2006

Electronic Signature of Signing Officer or Director

Date