

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109517

FILED
Aug 04, 2007
Secretary of State

Entity Name: ROAD ENDS SHOOTING CLUB, INC.

Current Principal Place of Business:

2809 RWS RANCH RD
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

2809 RWS RANCH RD
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: 55-0793318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, ROBERT W SR
2802 RWS RANCH RD
DAVENPORT, FL 33837 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCOTT, ROBERT W SR
Address: 2802 RSW RANCH RD
City-St-Zip: DAVENPORT, FL 33837

Title: SD () Delete
Name: ELLIS, EDWARD L
Address: 905 S 15TH ST, PO BOX 831
City-St-Zip: HAINES CITY, FL 33845

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W SCOTT

PRES

08/04/2007

Electronic Signature of Signing Officer or Director

Date