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Jun 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000066309 (4)

1. Corporation Name

SOUTHWEST SHOOTING CLUB, INC.

Principal Place of Business

27700 ZEMEL RD
PUNTA GORDA FL 33853
US

Mailing Address

27700 ZEMEL RD
PUNTA GORDA FL 33855-4803
US

2. Principal Place of Business

21 880 Cypress Lake Circle

Suite, Apt. #, etc.

22

City & State

23 Fort Myers, Florida

Zip

Country

24 33919

25

Lee

2a. Mailing Address

26 880 Cypress Lake Circle

Suite, Apt. #, etc.

27

City & State

28 Fort Myers, Florida

Zip

Country

29 33919

30

Lee

9. Name and Address of Current Registered Agent

HANSEN, CARL
880 CYPRESS LAKE CIRCLE
FORT MYERS FL 33919

3. Date Incorporated or Qualified

09/20/1993

3a. Date of Last Report

04/17/1996

4. FEI Number

65-0439020

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

6-6-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
P
HANSEN, CARL
880 CYPRESS LAKE CIR.
FORT MYERS FL 33919

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank]

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director, Secretary/Treasurer ☐ Change ☒ Addition

1.2 NAME Hansen, Carl

1.3 STREET ADDRESS 880 Cypress Lake Circle

1.4 CITY-ST-ZIP Fort Myers, Florida 33919

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

6-6-98 941-442 6110

CR2E034 (9/96)