2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2008
Secretary of State

DOCUMENT# P94000024701

Entity Name: DAVE RIFFLE GUN SALES, INC.

Current Principal Place of Business:

1339 JAMBALANA LANE
FT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

1339 JAMBALANA LANE
FT. MYERS, FL 33901 US

New Mailing Address:

FEI Number: 65-0479294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIFFLE, DAVID
1339 JAMBALANA LANE
FT MYERS, FL 33901 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PDC ( ) Delete
Name: RIFFLE, DAVID
Address: 1339 JAMBALANA LANE
City-St-Zip: FT MYERS, FL 33901

Title: STD ( ) Delete
Name: CIOFFI, SHANNON N
Address: 1343 JAMBALANA LN
City-St-Zip: FT MYERS, FL 33901

Title: D ( ) Delete
Name: CROSS-ZIEGLER, TARA M
Address: 410 SE 22ND STREET
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RIFFLE, DAVID
Address: 1339 JAMBALANA LANE
City-St-Zip: FT MYERS, FL 33901

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: DAVID RIFFLE PD 04/20/2008

Electronic Signature of Signing Officer or Director Date