

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000024701

FILED  
Jan 10, 2012  
Secretary of State

**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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RIFFLE, DAVID  
Address: 1339 JAMBALANA LANE  
City-St-Zip: FT MYERS, FL 33901

Title: STD  
Name: CIOFFI, SHANNON N  
Address: 275 AUTUMN RIDGE DRIVE  
City-St-Zip: MINERAL BLUFF, GA 30559

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

I hereby 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 all other like empowered.

SIGNATURE: DAVID RIFFLE

PD

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date