2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743043

Entity Name: MANATEE COUNTY GUN AND ARCHERY CLUB, INC.

FILED
May 31, 2020
Secretary of State
5298493939CC

Current Principal Place of Business:

1805 LOGUE ROAD MYAKKA CITY, FL 34251

Current Mailing Address:

1805 LOGUE ROAD

MYAKKA CITY. FL 34251 US

FEI Number: 59-1859462 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOSWORTH, KEN 1805 LOGUE ROAD MYAKKA CITY, FL 34251 US

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: KENNETH BOSWORTH 05/31/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	EXECUTIVE SECRETARY	Title	TREASURER
Name	WARE, IAN	Name	SLUTZMAN, STUART
Address	1805 LOGUE ROAD	Address	1805 LOGUE ROAD
City-State-Zip:	MYAKKA CITY FL 34251	City-State-Zip:	MYAKKA CITY FL 34251

Title DIRECTOR Title MEMBERSHIP SECRETARY Name FISCH, GEORGE MILLIGAN, BILL Name Address 1805 LOGUE ROAD Address 1805 LOGUE ROAD City-State-Zip: MYAKKA CITY FL 34251 City-State-Zip: MYAKKA CITY FL 34251

Title VP Title DIRECTOR

NameBENARROCH, ALNameFRANKLIN JR., BILLYAddress1805 LOGUE ROADAddress1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251 City-State-Zip: MYAKKA CITY FL 34251

Title DIRECTOR Title PRESIDENT

Name LARRY, NOSSEN

Address 1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251

Title PRESIDENT

Name BOSWORTH, KEN

Address 1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251

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

SIGNATURE: KEN BOSWORTH PRESIDENT 05/31/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name GERACE, KEN
Address 1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251

Title DIRECTOR
Name BERRY, ERIC

Address 1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251

Title DIRECTOR

Name STAFFORD, ROBERT Address 1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251

Title DIRECTOR

Name GRANARRO, JOHN
Address 1805 LOGUE ROAD
City-State-Zip: MYAKKA CITY FL 34251

Title DIRECTOR

Name NIEVES, VINCENT
Address 1805 LOGUE ROAD

City-State-Zip: MYAKKA CITY FL 34251