2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2024
Secretary of State
9054758598CC

DOCUMENT# P22000046960

Entity Name: DIVISION 3 WEAPONS, INC

Current Principal Place of Business:

309 ROUTE
SUITE 415
OSTEEN, FL 32764

Current Mailing Address:

1460 SOUTH LEAVITT AVENUE
ORANGE CITY, FL 32763 US

FEI Number: 92-0457531

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHINCHOR, TIMOTHY Z
1460 SOUTH LEAVITT AVENUE
ORANGE CITY, FL 32763 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO, CHAIRMAN
Name	CHINCHOR, TIMOTHY Z
Address	1460 SOUTH LEAVITT AVENUE
City-State-Zip:	ORANGE CITY FL 32763

Title	PRESIDENT, DIRECTOR
Name	DEROBERTIS, ROCCO S
Address	1460 SOUTH LEAVITT AVENUE
City-State-Zip:	ORANGE CITY FL 32763

Title	VP, DIRECTOR
Name	CHINCHOR, TIMOTHY I
Address	1460 SOUTH LEAVITT AVENUE
City-State-Zip:	ORANGE CITY FL 32763

Title	SECRETARY, DIRECTOR
Name	CHINCHOR, SARAH L
Address	1460 SOUTH LEAVITT AVENUE
City-State-Zip:	ORANGE CITY FL 32763

Title	CFO, DIRECTOR
Name	MARSIL, GAGE J
Address	1460 SOUTH LEAVITT AVENUE
City-State-Zip:	ORANGE CITY FL 32763

Title	DIRECTOR
Name	MITCHELL, RILEY
Address	1460 SOUTH LEAVITT AVENUE
City-State-Zip:	ORANGE CITY FL 32763

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: GAGE MARSIL CFO 02/07/2024

Electronic Signature of Signing Officer/Director Detail — Date