

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000005874

**FILED**  
**Feb 19, 2024**  
**Secretary of State**  
**2451062476CC**

**Entity Name:** NATIONAL SHOOTING SPORTS FOUNDATION, INC

**Current Principal Place of Business:**

6 CORPORATE DRIVE, SUITE #650  
SHELTON, CT 06484

**Current Mailing Address:**

6 CORPORATE DRIVE, SUITE #650  
SHELTON, CT 06484 US

**FEI Number:** 06-0860132

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 C  
Name SCOTT, ROBERT L  
Address 2315 W. SHINNECOCK CT.  
City-State-Zip: PHOENIX AZ 85086-3012

Title VC  
Name HORNADY, STEPHEN  
Address 3265 OLD POTASH HWY  
City-State-Zip: GRAND ISLAND NE 68802-1848

Title P, CEO  
Name BARTOZZI, JOSEPH  
Address 6 CORPORATE DRIVE  
SUITE 650  
City-State-Zip: SHELTON CT 06484

Title AS  
Name KEANE, LAWRENCE G  
Address 6 CORPORATE DRIVE  
SUITE 650  
City-State-Zip: SHELTON CT 06484

Title AT  
Name SMITH, JOHN  
Address 6 CORPORATE DRIVE  
SUITE 650  
City-State-Zip: SHELTON CT 06484

Title CVC  
Name REH, JEFFREY  
Address 17601 BERETTA DR.  
City-State-Zip: ACCOCKEEK MD 20607-9515

Title T  
Name FLAUGHER, BRETT  
Address 600 POWDER MILL ROAD  
City-State-Zip: EAST ALTON IL 62024

Title BOD  
Name DORSEY, JOSHUA W  
Address PO BOX 369  
City-State-Zip: SMYRNA GA 30082

**Continues on page 2**

*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:** LAWRENCE G. KEANE

**ASST. SECRETARY/GC**

**02/19/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name HALL, TRAVIS  
Address ONE BROWNING PL  
City-State-Zip: MORGAN UT 84050-9326

Title BOD  
Name PETTET, BRUCE  
Address PO BOX 68814400 NW  
City-State-Zip: BEAVERTON OR 97075-0688

Title BOD  
Name CHISHOLM, SANDY  
Address 5065 YACHT HARBOR CIRCLE 702  
City-State-Zip: NAPLES FL 34112

Title BOD  
Name TUCKER, BRYAN  
Address 6100 WILKINSON DR  
City-State-Zip: PRESCOTT AZ 86301

Title BOD  
Name WESTROM, JEANELLE  
Address 3701 MISSISSIPPI AVENUE  
City-State-Zip: DAVENPORT IA 52807

Title BOD  
Name ARONSON, LAURIE  
Address PO BOX 83280  
City-State-Zip: BATON ROUGE LA 70884

Title BOD  
Name KILLOY, CHRIS  
Address 1 LACEY PL  
City-State-Zip: SOUTHPORT CT 06490

Title BOD  
Name CHANDLEY, JIM  
Address 4350 FOSSIL CREEK BLVD  
City-State-Zip: FORT WORTH TX 76137

Title BOD  
Name SPRAGUE, RICHARD  
Address 345 W 32ND ST  
City-State-Zip: YUMA AZ 85364-8107

Title BOD  
Name VANDERBRINK, JASON  
Address 900 EHLEN DR  
City-State-Zip: ANOKA MN 55303

Title BOD  
Name CHARTIER, PAUL  
Address 7 GRASSO AVENUE  
City-State-Zip: NORTH HAVEN CT 06473

Title BOD  
Name DANIEL, MARTY  
Address 100 WARFIGHTER WAY  
City-State-Zip: BLACK CREEK GA 31308