

18-663629



Secretary of State
Statement of Information
(California Nonprofit, Credit Union and
General Cooperative Corporations)

29

SI-100

FILED
Secretary of State
State of California
NOV 05 2018

IMPORTANT — Read instructions before completing this form.

Filing Fee — \$20.00;

Copy Fees — First page \$1.00; each attachment page \$0.50;
Certification Fee - \$5.00 plus copy fees

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State)

CALIFORNIA ASSOCIATION OF FEDERAL FIREARMS LICENSEES,
INC.

21/NF/VC/20R
This Space For Office Use Only

11/8/18

2. 7-Digit Secretary of State File Number

C3426119

3. Business Addresses

a. Street Address of California Principal Office, if any - Do not enter a P.O. Box 4212 N. FREEWAY BLVD. SUITE 6	City (no abbreviations) SACRAMENTO	State CA	Zip Code 95834
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code

4. Officers The Corporation is required to enter the names and addresses of all three of the officers set forth below. An additional title for Chief Executive Officer or Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ MICHAEL	First Name	Middle Name	Last Name BARYLA	Suffix
Address 4212 N. FREEWAY BLVD. SUITE 6	City (no abbreviations) SACRAMENTO	State CA	Zip Code 95834	
b. Secretary KYLE	First Name	Middle Name	Last Name KENNINGTON	Suffix
Address 4212 N. FREEWAY BLVD. SUITE 6	City (no abbreviations) SACRAMENTO	State CA	Zip Code 95834	
c. Chief Financial Officer/ WESLEY	First Name	Middle Name	Last Name MORRIS	Suffix
Address 4212 N. FREEWAY BLVD. SUITE 6	City (no abbreviations) SACRAMENTO	State CA	Zip Code 95834	

5. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete Items 5a and 5b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

CORPORATION — Complete Item 5c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 5a or 5b

Paracorp Incorporated

C 1082536

6. Common Interest Developments

Check here if the corporation is an association formed to manage a common interest development under the Davis-Sterling Common Interest Development Act (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). See Instructions.

7. The information contained herein, including in any attachments, is true and correct.

11/2/2018

Brandon Combs

Exec. VP

Date

Type or Print Name of Person Completing the Form

Title

Signature