

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701958 (1)

1. Corporation Name
CONCORD ARMS INC

Principal Place of Business Mailing Address
C/O CLAIRE JOHNSTON 2830 N E 30TH ST FT LAUD FL 33306
C/O CLAIRE JOHNSTON 2830 N E 30TH ST FT LAUD FL 33306-1963



3. Date Incorporated or Qualified 01/26/1961
3a. Date of Last Report 04/12/1996

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number 59-0971729
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSTON, CLAIRE
2830 N.E. 30TH STREET
FORT LAUDERDALE FL 33306

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P DELETE
NAME MORAN, JAMES
STREET ADDRESS 2830 NE 30TH ST
CITY-ST-ZIP FT LAUDERDALE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V DELETE
NAME ~~MORAN, JAMES~~
STREET ADDRESS ~~2830 NE 30TH ST~~
CITY-ST-ZIP ~~FT LAUDERDALE, FL 33306~~

2.1 TITLE V Change Addition
2.2 NAME CELESTE EVANS
2.3 STREET ADDRESS 2830 N.E. 30th ST.
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE TS DELETE
NAME JOHNSTON, CLAIRE
STREET ADDRESS 2830 NE 30TH ST
CITY-ST-ZIP FT LAUDERDALE FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME ~~MORAN, JAMES~~
STREET ADDRESS ~~2830 NE 30TH ST~~
CITY-ST-ZIP ~~FT LAUDERDALE FL~~

4.1 TITLE D Change Addition
4.2 NAME STEVE DOLINAK
4.3 STREET ADDRESS 2830 N.E. 30th ST.
4.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE D DELETE
NAME HELSOM, FRANK
STREET ADDRESS 2830 NE 30TH ST.
CITY-ST-ZIP FT. LAUDERDALE FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V DELETE
NAME ~~EVANS, CELESTE~~
STREET ADDRESS ~~2830 NE 30TH ST~~
CITY-ST-ZIP ~~FT LAUDERDALE FL~~

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JAMES F. MORAN *James F. Moran, Pres.* 2-9-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0035725

CR2E037 (9/96)