## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



[14] [4] [4] [4] [4]

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600007681 (5)

COBW SPORTS, INC.

Principal Place of Business

Mailing Address

9941 I VAIN OT

## **FILED** Apr 29 1997 8:00am Secretary of State



SARASOTA FL 34231	SARASOTA FL 34231-4418				
			3. Date Incorporated or Qualified 01/24/1996	3a. Date of Last Report	
2. Principal Place of Business	2a. Mailing Address	) N	4. FEI Number	Applied For	
Suite, Apt. #, etc.	IVE 26 829 DAK T	OND DRIV	E 65-065259		
22 City & State	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23 OSPREY, FL	PREY, TL 28 OSPREY, FL		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
	229 25 U.S. 29 34229 30 U.S.		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
			10. Name and Address of New Re		
ICARD, MERRILL, CULLIS, TIMM FUREN & GINSB 81 Name					
2033 MAIN STREET		82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 600 SARASOTA FL		83			
0/11/00/// 1		24			
		84 City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections office or registered agent, or both, in the control of the familiar with and second the control of	607.0502 and 607.1508, Florida Statutes, the State of Florida. Such change was author	he above-named corrections	corporation submits this statement for the portation's board of directors. Thereby accer	purpose of changing its registered	
agent. Familian with, and accept the obligations of, Section 607.0505, Fiorida Statutes.					
SIGNATURE Signature, typed or printed name of reg	istered agent and title if applicable (NOTE Reg	gistered Agent signature re	equired when reinstating)	DATE	
	ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	}	
TITLE D	DELETE	1.1 TITLE		Change	
NAME WOOD, WILLIAM		1.2 NAME		[2	
STREET ADDRESS 2241 LYNN ST.  OUTV. ST. 7/P  SARASOTA FL 34231		1.3 STREET ADDRESS	829 Oak Pond Dri	se [	
TITLE SAFASULA PL 34231	DELETE	1.4 CiTY - S1 - 7/P	Ospsey Fr 342	29	
NAME	() pricie	2.1 THILE 2.2 NAME.		☐ Change ☐ Addition C	
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP		2. 4 C(1Y-S1-ZIP			
TITLE		3.1 TITLE		Change Addition	
NAME		3.2 NAME			
STREET ADDRESS	1	3 3 STREET ADDRESS			
CITY-ST-ZIP		34 CITY-ST-ZIP			
TITLE		4.1 TITLE		Change Addition	
NAME		4 2 NAME			
STREET ADDRESS	1	4 3 STREET ADDRESS			
CITY-ST-ZIP		4.4 City-St-ZiP 5.1 Title		Change Addition	
NAME	<del>-</del>	5.2 NAME		E CHANGE L AUDITON	
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY - ST - ZIP			
TITLE		6.1 TITLE		☐ Change ☐ Addition	
NAME	i	6.2 NAME		·	
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY - S1 - 7IP			

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 eath; that 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 in Block 12 or Block 13 if changed, or on an attachment with an address