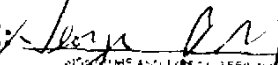


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED APR 19 PM 5:00 SECRETARY OF STATE	
FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company TENOROC SHOOTING CENTER LLC 3755 TENOROC MINE ROAD LAKELAND FL 33805		DOCUMENT # L98000000545			
2. Principal Place of Business 3755 TENOROC MINE RD Suite, Apt. #, etc.		2a. Mailing Address 3755 TENOROC MINE RD Suite, Apt. #, etc.		3. Date Organized or Qualified 04/30/1998	
City & State LAKELAND FL		City & State LAKELAND FL		4. FEI Number 59-3505242	
Zip 33805		Country USA		5. Date of Last Report ☐ Applied For ☐ Not Applicable	
7. Name and Address of Current Registered Agent CORPORATION SERVICE, COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	LUNDQUIST, ART	3755 TENOROC MINE ROAD		LAKELAND FL	
MGRM	SOLSMAN, GEORGE	3755 TENOROC MINE ROAD		LAKELAND FL	
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: 		20 April 1999		941-666 2850	