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

PROFIT CORPORATION ANNUAL REPORT

1999

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

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23



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 385917

WHITE'S TACKLE SHOP, INC.

Principal Place of Business	Mailing Address				
521 N. SECOND STREET FT PIERCE FL 34950	521 N. SECOND STREET FT PIERCE FL 34950				

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90048 015 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

07/27/1971

59-1355876

4. FEI Number

Country	Zip	Cou	ntry		8. This corporation owes the c	urrent year Ini	angible	
Zip Country Zip Country 25 29 30				Personal Property Tax.		☐ Yes	∳4 No	
9. Name and Address of Current I	Registered Agent				10. Name and Address of New	w Registered	Agent	
			81	Name				
fensberger, Johnq D II			82	Street Addres	ss (P.O. Box Number is Not Acce	ptable)		
		1	-	0110017100101		,		
T PIERCE FL 34950		l	83					
			94	City	· · · · · · · · · · · · · · · · · · ·		85 Zin	Code
			••	City		FL	. "	_
egistered agent, or both, in the State of	Florida, Such chanc	ge was authorized	l by i	the corporation	ation submits this statement for t 's board of directors. I hereby ac	he purpose of cept the appo	changing i	ts registered registered
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1	9. Name and Address of Current FENSBERGER, JOHNQ D II N. SECOND STREET T PIERCE FL 34950 to the provisions of Sections 607.0502 begistered agent, or both, in the State of the International Internat	9. Name and Address of Current Registered Agent FENSBERGER, JOHNQ D II N. SECOND STREET T PIERCE FL 34950 To the provisions of Sections 607.0502 and 607.1508, Floric egistered agent, or both, in the State of Florida. Such chang in familiar with, and accept the obligations of, Section 607.0 Signature, typed or printed name of registered agent and tatle if applicable. OFFICERS AND DIRECTORS PD RAFFENSBERGER, JOHN D II 521 N. SECOND STREET FORT PIERCE FL 34950 VPSD RAFFENSBERGER, PATTI 521 N. SECOND STREET FORT PIERCE FL 34950 S RAFFENSBERGER, J DONALD 521 N. SECOND STREET FORT PIERCE FL 34950 DE DE DE DE DE DE DE DE DE D	9. Name and Address of Current Registered Agent FENSBERGER, JOHNO D II N. SECOND STREET T PIERCE FL 34950 To the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the all egistered agent, or both, in the State of Florida. Such change was authorized in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, in a legistered agent, or both, in the State of Florida. Such change was authorized in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the all egistered agent and title if applicable. OFFICERS AND DIRECTORS PD RAFFENSBERGER, JOHN D II 521 N. SECOND STREET FORT PIERCE FL 34950 VPSD RAFFENSBERGER, PATTI 521 N. SECOND STREET FORT PIERCE FL 34950 S RAFFENSBERGER, J DONALD 521 N. SECOND STREET FORT PIERCE FL 34950 DELETE 3351 FORT PIERCE FL 34950 DELETE 4.2N 4.2N 4.3S1 GELETE 52N 5383 54CI DELETE 6.1TI 62N 6385	9. Name and Address of Current Registered Agent FENSBERGER, JOHNQ D II N. SECOND STREET T PIERCE FL 34950 83 84 to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above agistered agent, or both, in the State of Florida. Such change was authorized by m familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent OFFICERS AND DIRECTORS) PD	9. Name and Address of Current Registered Agent SENSBERGER, JOHNQ D II N. SECOND STREET T PIERCE FL 34950 83 84 City to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpor agistered agent, or both, in the State of Florida. Such change was authorized by the corporation in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS PD OFFICERS AND DIRECTORS 13. PAFFENSBERGER, JOHN D II 521 N. SECOND STREET FORT PIERCE FL 34950 UPSD AFFENSBERGER, PATTI 521 N. SECOND STREET FORT PIERCE FL 34950 DELETE 13 STREET ADDRESS 14 CITY-ST-ZIP PAFFENSBERGER, J DONALD S AFFENSBERGER, J DONALD S OFFICERS AND DIRECTORS DELETE 13 STREET ADDRESS 2.4 CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE 6.1 TITLE	25	9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 10. The provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-mamed corporation submits this statement for the purpose of segistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appoint familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. Signature with an original content of the purpose of production with a spin and provided the obligations of Section 607 0505, Florida Statutes. OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AT 11 TITLE RAFFENSBERGER, JOHN D II 1.2 NAME 1.2 NAME 2.2 NAME 2.3 STREET ADDRESS FORT PIERCE FL 34950 DELETE 1.3 TITLE AFFENSBERGER, DONALD 2.1 N. SECOND STREET FORT PIERCE FL 34950 DELETE 3.3 TITLE 3.4 CITY-ST-ZP DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZP DELETE 6.1 TITLE 5.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZP DELETE 6.1 TITLE 6.1 TITLE 6.3 NAME 6.3 STREET ADDRESS 6.3	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name and Address of New Registered Agent 13. Name and Address of New Registered Agent 14. Name 15. Street Address (P.O. Box Number is Not Acceptable) 15. SECOND STREET 17. PIERCE FL 34950 16. City 17. Sections 607.0502 and 607.1506. Florida Statules, the above-named corporation submits this statement for the purpose of changing is egistered agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing in familiar with, and accept the obligations of. Section 607.0502, Florida Statules. 18. Address (P.O. Box Number is Not Acceptable) 18. Section 607.0502 and 607.1506. Florida Statules were adverted agent submits this statement for the purpose of changing in familiar with, and accept the obligations of. Section 607.0500, Florida Statules. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECT Registered Agent signature required when releasing to the property accept the appointment as in familiar with, and accept the obligations of. Section 607.0500, Florida Statules. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECT Change Change Agent signature required when releasing to the property of the corporation submits this statement for the purpose of changing in familiar required when releasing to the corporation submits this statement for the purpose of changing in familiar required when releasing to the corporation is board of directors. I hereby accept the obligation of changing in familiar required when releasing to the corporation is board of directors. I hereby accept the obligation of changing in familiar required when releasing to the property of the corporation is board of directors. I hereby accept the obligation of changing in familiar required when releasing to the purpose of changing the pu

4. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07 (5)f, Florida Statutes. Indicated with 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dat

KZEU34 (11/98)