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PROFIT CORPORATION ANNUAL REPORT



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

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MAY #17 AT INF #207 P.O. BOX 607 EAST PALATKA FL 22131 US			ARMS, INC.		. ,								
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28	City & State			L	City & State					6. Election Campaign Financing			
Section Sect	23			28									•
MACHEK, JAMES E. HWY. 207, ORANGE MILLS P.O. BOX 607 E. PALATKA FL 32131 1. Pursuant to the provisions of Sections 607,0002 and 607 1508, Floridis Statutes, the above-hamed corporation submits this statement for the purpose of changing list registered agent, or both, in the State of Floridia. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Floridia. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I em change to present the objections of Section 607,000, broad Statutes. SIGNATURE System hard one principal registered agent. I em change to present the objection of Section 607,000, broad Statutes. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICE RS AND DIRECTORS IN 12. 13. INTER SIRRET ADDRESS SIRRET ADDRESS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. INTER 15. INTE		-	ry		Zip			ry				ax under	s 199.032,
MACHEK, JAMES E.	24		ess of Current I		ered Agent	[3	01		·			Agent	
March Marc					o, ou rigon		8	1	Name	10, Name and Address of New A	ogistereu	Agent	
March Marc	MACHE	K. JAMES E.					Ļ	1		(0.0 Part No. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	(-)		
E. PALATKA FL 32131 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607 1508, Fixerida Statutes, the above-named corporation submits this statement for the purpose of changing as registered different sharling with, and accept the obligations of, Section 607,0505, Fixerida Statutes, the above-named corporation's board of devectors. I hereby accept the appointment as registered agent. I am State of Fixerida Such change was authorized by the corporation's board of devectors. I hereby accept the appointment as registered agent. I am State of private hard of private days and act life fractable. SIGNATURE 12. OFFICERS AND DIFFECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12 INTEL VSD DELETE 1.1 THE STONE, ANGELA M. 2.1 NAME STONE, ANGELA M. 2.1 NAME 2.1 NAME 2.1 HAVY 17TH SOUTH 1.2 NAME 1.2 NAME 2.2 NAME 2.2 NAME 2.3 SIRRET ADDRESS 2.19 HWY 17TH SOUTH 2.2 NAME 2.3 SIRRET ADDRESS 2.19 HWY. 17 SOUTH 2.2 SIRRET ADDRESS 2.19 HWY. 17 SOUTH 2.2 SIRRET ADDRESS 2.19 HWY 17TH SOUTH 2.2 SIRRET ADDRESS 2.19 HWY 17TH SOUTH 2.2 SIRRET ADDRESS 2.19 HWY 17TH SOUTH 3.3 SIRRET ADDRESS 2.19 HWY 17TH SOUTH 3.3 SIRRET ADDRESS 2.19 HWY 17TH SOUTH 4.1 INITE D DELETE 3.1 INITE D Change Addition ACCITY-ST-ZIP MACHEK, JAMES E. 9.0. BOX 382, HWY \$17 3.3 SIRRET ADDRESS CITY-ST-ZIP 1.10 DELETE 3.4 CITY-ST-ZIP 1.10 DELETE 3.5 SIRRET ADDRESS 3.5 S							l°	2	Street Addre	ess (P.O. Box Number is Not Acceptab	(E)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, or both, in the State of Eurida. Such change was authorized by the above-named corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	P.O.BO)	X 607					8	3					
Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of I kinida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am with and accept the obligations of, Section 607,0505, Florida Statutes. Signature Purpose of price of	E. PALA	TKA FL 32131					8	4	Gilv			85	Zin Code
SIGNATUFE System typed or prined name of registered again and title factorable Notice Projected Again seption, received where resisting DATE 12.			· · · · · · · · · · · · · · · · · · ·						•		FL	.	,
SIGNATUFE System typed or prined name of registered again and title factorable Notice Projected Again seption, received where resisting DATE 12.	11. Pursuant to or registere	o the provisions of Sec od agent, or both, in the	tions 607.0502 a State of Florida	nd 607 . Such	'.1508, Florida Sta change was autho	atutes, t iorized b	the above by the co	e-na rpoi	amed corpora ration's boar	ation submits this statement for the pur d of directors. I hereby accept the appo	pose of ch pintment as	anging it	s registered office ed agent. I am
Style Styl		h, and accept the oblig	ations of, Section	1 607.0	505, Florida Statu	utes.						Ť	v
TITLE	SIGNATURE	Signature, typed or printed name	of registered agont an	d title fa;	plicable.	(NOTE: F	Registered Ag	ent :	signature required	when reinstating)	DATE		
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64 CITY-S1-ZIP 64 CITY-S1-ZIP 14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further		certify that the information	ation supplied wit	h this f	ilino is voluntarily f	fumishe	64 CiTY	- \$1 - XAS	not qualify fo	or the exemption stated in Section 110	17(3)(L) EL	rida Sta	tidae I furthar

red of bally for the experience 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 I am an officer or director of this 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.

SIGNATURE: JAMES E. MACHEL JAMES SIGNING OFFICER OR DIRECTOR

4/30/96 904-328-2623