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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FLORIDA WHOLESALE SPORTING GOODS, INC.

Principal Place of Business Mailing Address 1490 HAWTHORNE ROAD 1400 HAWTHODNE DOAD

FILED May 06 1998 8:00am Secretary of State



GAINESVILLE FL \$2641		GAINESVILLE FL 32841		DO NOT WRITE IN THIS S	DAOE	
				DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified	PACE	
				1		
9 Principal Pl	ace of Business	2a. Mailing Address	·	07/15/1981 4. FEI Number	Applied For	
21		26		59-2380709	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the curr	ent year Intangible	
24	25		0		Yes No	
	9, Name and Address of Cui	rrent Registered Agent		10. Name and Address of New Registered A	igent	
DAEMER, JUDY C			81 Name	81 Name		
1809 SE 10TH TERRACE			82 Street Address (P.O. Box Number is Not Acceptable)			
GAINE8VILLE FL 32641			1			
			83			
			84 City		85 Zip Code	
				FL		
11. 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 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 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and little of applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	B	DELETE	11 TITLE	P	☐ Change	
NAME	CLARK, CHARLES	——	1.2 NAME		' '	
STREET ADDRESS	1906 SE 12TH STREET		1.3 STREET ADDRESS	JUDY C. DAEMER 1809 SE LOTH TER		
CITY-ST-ZIP	GAINESVILLE FL 32641		14 CITY-ST-ZIP	GAINESVILLE, FL 326	<u>i 1</u>	
TITLE	V	☐ DELETE	21 TITLE		☐ Change ☐ Addition	
NAME	CLARK, JOHN		22 NAME			
STREET ADDRESS	RT 5 BOX 2231		2.3 STREET ADDRESS			
CITY-ST-ZIP	PALATKA FL 32177		2 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME		,	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE'	5.1 TITLE		☐ Change ☐ Addition	
NAME.			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5 4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME		i	
STREET ADDRESS			6.3 STREET ADDRESS			
I I						

14. Thereby 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.