FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 15 AM 11:26

DOCUMENT # 832579 (7)

1. Corporation Name
OSHMAN SPORTING GOODS CO., FLORIDA

Principal Place of Business
2302 MAXWELL LANE
HOUSTON TX 77023

Mailing Address
2302 MAXWELL LANE
HOUSTON TX 77023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/24/1974
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip
29
Country
30

4. FEI Number: 74-1774197 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
85 Zip Code

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 title if applicable. NOTE: Registered Agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~VAS~~	1.1 TITLE	V.P, SECRETARY, TREASURER	☒ Change ☐ Addition
NAME	BOCKART, RICHARD L	1.2 NAME		
STREET ADDRESS	2302 MAXWELL AVE	1.3 STREET ADDRESS		
CITY ST ZIP	HOUSTON TX	1.4 CITY ST ZIP		
TITLE	D	2.1 TITLE		☐ Change ☐ Addition
NAME	OSHMAN, MARILYN	2.2 NAME		
STREET ADDRESS	2302 MAXWELL AVE	2.3 STREET ADDRESS		
CITY ST ZIP	HOUSTON TX	2.4 CITY ST ZIP		
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	ARONOWITZ, MARVIN	3.2 NAME		
STREET ADDRESS	2302 MAXWELL AVE	3.3 STREET ADDRESS		
CITY ST ZIP	HOUSTON TX	3.4 CITY ST ZIP		
TITLE	CEO	4.1 TITLE		☐ Change ☐ Addition
NAME	LUBETKIN, ALVIN	4.2 NAME		
STREET ADDRESS	2302 MAXWELL AVE	4.3 STREET ADDRESS		
CITY ST ZIP	HOUSTON TX	4.4 CITY ST ZIP		
TITLE	~~VSD~~	5.1 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	~~GARLIN, EDWARD R.~~	5.2 NAME	ANDERSON, WILLIAM	
STREET ADDRESS	2302 MAXWELL AVE.	5.3 STREET ADDRESS		
CITY ST ZIP	HOUSTON TX	5.4 CITY ST ZIP		
TITLE		6.1 TITLE	V.P., CAO	☐ Change ☒ Addition
NAME		6.2 NAME	BOERNER, A. LYNN	
STREET ADDRESS		6.3 STREET ADDRESS	2302 MAXWELL LANE	
CITY ST ZIP		6.4 CITY ST ZIP	HOUSTON, TX 77023	

14. I do hereby certify that the information supplied with this filing 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 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.

SIGNATURE: A. Lynn Boerner — A. LYNN BOERNER 6/7/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0480045 FP