

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90067 007 ***150.00

DOCUMENT # F03000006042

1. Entity Name

MOHRSPORTS, INC.



Principal Place of Business

3466 FORSYTHE TERRACE
THE VILLAGES FL 32162

Mailing Address

3960 BOLES CREEK DR
DULUTH GA 30096

2. Principal Place of Business

3. Mailing Address

3466 Forsythe Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

The Villages, FL

Zip

Country

Zip

Country

32162

4. FEI Number

58-2532325

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOHR, CHARLES
3466 FORSYTHE TERRACE
THE VILLAGES FL 32162

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

CP
MOHR, CHARLES
3466 FORSYTHE TERRACE
THE VILLAGES FL 32162

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles Mohr CHARLES MOHR

3-30-04

Date

336 324-9330

Daytime Phone #