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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 MAR 31 AM 11:59

DOCUMENT # **F44928** **(2)**

1. Corporation Name
SUN SPORTS SALES, INC.

Principal Place of Business	Mailing Address
% WILLIAM C DAVISON 8004 BULLARA DR TEMPLE TERRACE FL 33637 US	% WILLIAM C DAVISON 8004 BULLARA DR TEMPLE TERRACE FL 33637 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/16/1981
3a. Date of Last Report: 08/11/1994

2. Principal Place of Business
21: 212 Redwood Ave.
22: Suite, Apt. #, etc.
23: City & State: Temple Terrace
24: Zip: FL 33617 Country: 25: US

2a. Mailing Address
26: 212 Redwood Ave.
27: Suite, Apt. #, etc.
28: City & State: Temple Terrace, FL
29: Zip: 33617 Country: 30: US

4. FEI Number: 59-2127095 ☐ 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

DAVISON, WILLIAM C
8004 BULLARA DR
TAMPA FL 33617

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 mandatory) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VST	11 TITLE	VST ☐ Change ☐ Addition
NAME	DAVISON, JANICE	12 NAME	Davison, Janice
STREET ADDRESS	8004 BULLARA DR	13 STREET ADDRESS	212 Redwood Ave.
CITY ST ZIP	TAMPA, FL 00000	14 CITY ST ZIP	Temple Terrace, FL 33617
TITLE	D	21 TITLE	D ☐ Change ☐ Addition
NAME	DAVISON, WILLIAM C	22 NAME	Davison, William C.
STREET ADDRESS	8004 BULLARA DR	23 STREET ADDRESS	212 Redwood Ave.
CITY ST ZIP	TAMPA, FL 00000	24 CITY ST ZIP	Temple Terrace, FL 33617
TITLE	D	31 TITLE	D ☐ Change ☐ Addition
NAME	DAVISON, JANICE	32 NAME	Davison, Janice
STREET ADDRESS	8004 BULLARA DR	33 STREET ADDRESS	212 Redwood Ave.
CITY ST ZIP	TAMPA FL	34 CITY ST ZIP	Temple Terrace, FL 33617
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(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.

SIGNATURE: Janice M. Davison (Janice M. Davison) 3/27/95 (813) 9856025
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR