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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F96000000753 (1) DOCUMENT #

THOSS SPORTING GOODS COMPANY, INC.

Principal Place of Business Mailing Address 3761-A GOVERNMENT BLVD. 3761-A GOVERNMENT BLVD. MOBILE AL 36693 MOBILE AL 36693

FILED Apr 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/09/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 63-0767087 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Z(p)Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WOOTEN, DANIEL 81 Name 28 EASTON ST **B2** Street Address (P.O. Box Number is Not Acceptable) CANTONMENT FL 32533 City 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 Sunge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am printing with, and accept the adjustic of Section 100.050, Florida Statutes. SIGNATURE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIFLE DELETE 11 TITLE Change Addition HOPE, HENRY H NAME 12 NAME **5225 JANEKYN DRIVE** STREET ADDRESS 1.3 STHEET ADDRESS MOBILE AL 36693 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition HOPE, HENRY H NAME 2.2 NAME 5225 JANEKYN DRIVE STREET ADDRESS 2.3 STREET ADDRESS MOBILE AL 36693 CITY ST 7IP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Channe Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-\$1-ZIP 3.4. CITY-S1-ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TATLE Change Addition NAME 62 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY - ST - ZIF 6.4 CITY-ST-ZIP

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 on an intitachmost with an address

SIGNATURE: