

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91149 037 ***150.00

DOCUMENT # F96000000753
1. Entity Name THOSS SPORTING GOODS, INC.

DUPLICATE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3761-A GOVERNMENT BLVD Suite, Apt. #, etc.	3. Mailing Address 3761-A GOVERNMENT BLVD Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State MOBILE, AL	City & State MOBILE, AL	4. FEI Number 63-0767087	Applied For Not Applicable
Zip 36693	Country MOBILE	Zip 36693	Country MOBILE

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name DANIEL WOOTEN	
Street Address (P.O. Box Number is Not Acceptable) 28 EASTON ST.	
City CANTONMENT	Zip Code FL 32533

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 _____

January 1 - May 1: Fee is \$150.00
After May 1: Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT STANLEY R. EVANS 2070 BRADBURY CT. MOBILE, AL 36695	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 4/27/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #