FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



11 ORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600002163 (1)

REMINGTON ARMS COMPANY, INC.

Principal Place	e of Business	Mailing Address			
870 REMINGT	ON DR	P O BOX 700			
MADISON NC 27025		MADISON NC 27025			DO NOT WRITE IN THIS CRACE
US		US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
					· ·
2 Principal Pi	lace of Business	2a. Mailing Address			04/30/1996 4. FEI Number Applied For
21	according to	26			51-0350935 Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.			S8 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zipi	Country		8. This corporation owes or has paid the current year Intangible
			30		Personal Property Tax due June 30. 🔲 Yes 💢 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
	CORPORATION SYSTEM		81	Name	00
1200 \$O UTH PINE ISLAND ROAD			82	Street	et Address (P.O. Box Number is Not Acceptable)
PLANTATION FL 33324			15.00	-	
	•		63		
			84	City	85 Zip Code
				<u> </u>	
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					
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flor	rida Statute	s	to position of source of the copy assessment as register ou
SIGNATURE					
	Signature, typed or printed numeral registered agree	· · · · · · · · · · · · · · · · · · ·		ent signatur	ature required when reinstating) DATE ADDITIONS (CLIANOSCO TO OFFICERS AND DIRECTORS IN 13)
TITLE	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	HOWE, HUBBARD C		1.2 NAME		and onlines .
	375 PARK AVE., 18TH FL.			, ADDDECC	
STREET ADDRESS	NEW YORK NY 10152			ADDRESS	55
CITY-ST-ZIP TITLE	DCOO	DELETE	1.4 CITY - : 2.1 TITLE	51 - 2012	Change Addition
NAME	MILLNER, THOMAS L		2.2 NAME		
STREET ADDRESS	870 REMINGTON DR		•	I ADDRESS	ce
CITY-ST-ZIP	MADISON NC		2 4 CiTY-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TITLE	Ď	DELETE	3.1 TITLE		Change Addition
NAME	BECHTEL, STEPHEN D JR.	_	3.2 NAME		_ ,
STREET ADDRESS	45 FREEMONT ST., 3RD FL.,	STE. 300		ADDRESS	28
CITY-ST-ZIP	SAN FRANCISCO CA 94105		3.4. CITY-		-
TITLE	D	DELETE	4 1 TITLE	E-1	Change Addition
NAME	BROWN, BOBBY R	•	4. 2 NAME		
STREET ADDRESS	1800 WASHINGTON RD.			ADDRESS	SS
CITY-ST-ZIP	PITTSBURGH PA 15241-1421		4.4 CITY - 1		
TITLE	D	DELETE	5.1 HILE		Change Addition
NAME	DRESDALE, RICHARD C		5.2 NAME		
STREET ADDRESS	152 WEST 57TH ST.		5.3 STREE	ADDRESS	ss
CITY-ST-ZIP	NEW YORK NY 10019		5.4 CITY - 8		
TITLE	0	DELETE	61 TITLE		Change Addition
NAME	GILLELAND, RICHARD A		6.2 NAME		
STREET ADDRESS	2829 TOWNSGATE RD., STE.	101	6.3 STREET	ADDRESS	ss
CITY-ST-ZIP	WESTLAKE VILLAGE CA 9136		6.4 CITY - :		
14. I hereby o			the exemp	tion state	tated 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					
	or Block 13 if changed, or on an attac				•
		2 <u></u>			