

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 27 1997 8:00am
Secretary of State

DOCUMENT # F96000002554 (1)

1. Corporation Name
EARTH & OCEAN SPORTS, INC.



Principal Place of Business

3010 REYNOLDS RD.
LAKELAND FL 33803

Mailing Address

3010 REYNOLDS RD.
LAKELAND FL 33803-8336

3. Date Incorporated or Qualified
05/21/1986

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip

25. Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

30

4. FEI Number

04-3195264

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

BRIGODE, JOHN
5028 DORMAN RD.
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81. Name

DAVID S. WOODWARD

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

625 W. PARK STREET

83.

84. City

LAKELAND

FL

85. Zip Code

33803

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

David S. Woodward

PLANT MANAGER

1/9/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME GLYDON, JON A
STREET ADDRESS 100 ALDERBROOK LANE
CITY-ST-ZIP WEST BARNSTABLE MA 02668

TITLE S
NAME MILLER, EDWIN
STREET ADDRESS 82 SUDBURY RD.
CITY-ST-ZIP WESTON MA 02183

TITLE D
NAME CONWAY, THOMAS
STREET ADDRESS 138 BAKER AVE.
CITY-ST-ZIP CONCORD MA 01742

TITLE D
NAME ROTH, STEVEN
STREET ADDRESS 192 E. EMERSON RD.
CITY-ST-ZIP LEXINGTON MA 02173

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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:

Jon Glydon

1/13/97 508-778-5528

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)