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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 02 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

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BOOT BARN, INC. Principal Place of Business Mailing Address 7138 STIRLING ROAD 7138 STIRLING ROAD HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/26/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2463265 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation twee or has paid the current year Intangible Personal Property Tax due June 30. Yes No ☐ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SHAPIRO, TED 7138 STIRLING ROAD Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33024 83 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 little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSD DELETE Change ☐ Addition TITLE 1.3 TITLE SHAPIRO, TED 1.2 NAME NAME 120 S.W. 96TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition SHAPIRO, FRANCINE 2.2 NAME 120 S.W. 96TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS PLANTATION FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE ☐ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-\$T-2IP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 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 champed, or on an apperhment with an address.