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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H53417

GLOBAL SPORTS, INC.

Principal Place	of Business	Mai	ling Address					
% WILLIAM H.		₽. 0). BOX 4					
3733 UNIVERSITY BLVD. WEST. SUITE 110 JACKSO JACKSONVILLE FL 32217 US		KSONVILLE FL 32201			DO NOT WRITE IN THI	S SPACE		
JACKSONVILLE	FL 32217	US				3. Date Incorporated or Qualifed		
						04/15/1985		
2. Principal P	ace of Business	2a.	Mailing Address			4. FEI Number	Ap	plied For
21	acc of Basiness	\vdash				59-2646815	No	t Applicable
	#, etc.		Suite, Apt. #, etc.	_			\$8.75 △	Additional
22		27				5. Certificate of Status Desired	Fee Re	quired
City & State	9		City & State	_ ~		6. Election Campaign Financing	\$5.00	May Be
23	The state of the s	28				Trust Fund Contribution	Added to	o Fees
Zip	Country		Zip	Country		8. This corporation owes the current year li		<i>ب</i> .
24	25	29	30	0		Personal Property Tax.	Yes	No
	9. Name and Address of Currer	st Registe	ered Agent			10. Name and Address of New Registered	Agent	
BAAN	E00 14/11/14/14			81	Name			
				82	Street Ad	ldress (P.O. Box Number is Not Acceptable)		
JACI	SUNVILLE FL 32202			83				
				84	City		85 Zip (Code
	City & State Country Zip 25 9. Name and Address of Current Registered Agent MANESS, WILLIAM H. 118 W ADAMS STREET STE 801 JACKSONVILLE FL 32202 Insuant to the provisions of Sections 607.0502 and 607.1508, Florida Statifice or registered agent, or both, in the State of Florida. Such change was lent. I am familiar with, and accept the obligations of, Section 607.0505, FATURE					F :		
11. Pursuant	to the provisions of Sections 607.050	2 and 60	7.1508, Florida Statutes,	, the above	e-named co	rporation submits this statement for the purpose of the purpose of the purpose of the appropriate the appropri	it changing its sintment as rec	registered gistered
agent. I a	m familiar with, and accept the obliga	tions of,	Section 607.0505, Florid	a Statutes				•
SIGNATURE				_				
					nt signature requ	ired when reinstating) DATE	ND DIRECTO	DC IN 12
12.		ND DIREC		13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE			□ DECE IE	1.1 TITLE			□ ournage	- radiion
NAME	WOLFSON, CECIL W.			1.2 NAME	į			
STREET ADDRESS	3733 UNIVERSITY BLVD W.					•		
CITY-ST-ZIP	JACKSONVILLE FL				ADDRESS	•		
TITLE	PD		- December	1.4 CITY-5	1		Change	Addition
NAME		<u></u>	☐ DELETE	1.4 CITY-5 2.1 TITLE	1	· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
STREET ADDRESS	GRAY, RICHARD M.	<u> </u>	☐ DELETE	1.4 CITY-5 2.1 TITLE 2.2 NAME	T-ZIP	·	Change	Addition
CITY-ST-ZIP	3733 UNIVERSITY BLVD W.	<u>.</u>	☐ DELETE	1.4 CITY-5' 2.1 TITLE 2.2 NAME 2.3 STREET	T-ZIP	· ·	Change	☐ Addition
•··· •· =-	3733 UNIVERSITY BLVD W. JACKSONVILLE FL	<u>.</u>		1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	T-ZIP			
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	3733 UNIVERSITY BLVD W. JACKSONVILLE FL SD TOMBERLIN, M. C.	· 4-		1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	T-ZIP F ADDRESS ST-ZIP			
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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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP