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

CITY-ST-ZIP

PROFIT Feb 02 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # H68575 (0)STEVE'S SPORTS SHOP, INC. Principal Place of Business Mailing Address 112 RODENHALL RD 112 BODENHAM RD **LAKE PLACID FL 33852-7051** LAKE PLACID FL 33852-7051 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/26/1985 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 59-2551006 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution П Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BULLARD, STEPHEN J. 600 LAKE FRANCIS RD. 82 Street Address (P.O. Box Number is Not Acceptable) LAKE PLACID FL 33852 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Ftorida 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 title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE Change Addition NAME BULLARD, STEPHEN J. 1.2 NAME 600 LAKE FRANCIS RD. STREET ADDRESS 1.3 STREET ADDRESS LAKE PLACID FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition **BULLARD. BARBARA ANN** NAME 22 NAME STREET ADDRESS 600 LAKE FRANCIS RD. 2.3 STREET ADDRESS LAKE PLACID FL CITY-ST-ZIP 2.4 CITY - ST-ZIP TITLE DELETE 3.1 TITLE Change Addition BULLARD, BARBARA ANN NAME 3.2 NAME 600 LAKE FRANCIS RD. STREET ADDRESS 3.3 STREET ADDRESS LAKE PLACID FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

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 suppliemental 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.

AMPRICA ANN BULLAND

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FILED