## , 2996 FOR PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # J02654 LAWMEN'S AND SHOOTERS' SUPPLY OF FT. PIERCE.



**FILED** 

May 04, 2006 8:00 am Secretary of State

05-04-2006 90242 014 \*\*\*150.00 Principal Place of Business Mailing Address 40084963 7750 9TH STREET SW 7750 9TH STREET SW VERO BEACH, FL 32968 VERO BEACH, FL 32968 2. Principal Place of Business 3. Mailing Address Suite Ant. # etc. Suite, Apt. #, etc. 03272006 Chq-P CR2E034 (11/05) City & State Applied For City & State 4. FFI Number 59-2670429 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KNIGHT, C. REED JR Street Address (P.O. Box Number is Not Acceptable) 7750 9TH STREET S.W. VERO BEACH, FL 32968 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees \*OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE PST ☐ Delete TITLE DPST ★ Change Addition KNIGHT, C. REED, JR. NAME NAME KNIGHT, C. REED, JR. 7750 9TH STREET S.W. STREET ADDRESS STREET ADDRESS 7750 9TH ST SW VERO BEACH, FL 1 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32968-9298 TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-2IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 upport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

C. REED KNIGHT, JR.

4/17/06

(772) 569-8700

Daytime Phone #