## 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

DOCUMENT # J33588

(1)

FLORIDA CRACKER GUN & TACKLE, INC.

FILED May 02 1997 8:00am Secretary of State

Principal Place of	Business	Mailing Addr	088		1 1901119 9190 11100 11101 91101 1919F (Bit BIGIT BIGIT BIGIT BIGIT BIGIT BIGIT	
G/O LEON L DOWD 852 N BEACH ST ORMOND BEACH F		G/O LEON L I 852 N BEACH ORMOND BEA				
					3. Date Incorporated or Qualified 3a. Date of Last Report 09/17/1986 08/09/1996	
2. Principal Place	of Business	2a. Mailing A	ddress		4. FEI Number Applied For	
21		26			<b>59-2723131</b> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt	. #, etc.	• • •	5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & Sta	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Ζφ <b>29</b>	Country 30		8. This corporation has liability for intangible tax under s 199.032.  Florida Statutes	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
DOWDEE, LEON L JR 852 N BEACH ST ORMOND BEACH FL 32174				32	Name Street Address (P.O. Box Number is Not Acceptable)	
				34	FL 85 Zip Code	
office or regis	e provisions of Sections 607, stered agent, or both, in the S amiliar with, and accept the of	itate of Florida. Such c	hange was authorized.	by	ove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered ites.  4-23-97	

(NOTE: Registered Agen; signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE ☐ Addition Change TITLE 1.1 TOLE DOWDEE, LEON L., JR. NAME 1.2 NAME 852 N. BEACH ST. STREET ADDRESS 1.3 STREET ADDRESS ORMOND BEACH FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition 2.1 1/116 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP Change DELF1E Addition TITLE 3.1 TITLE STREET ADDRESS 3.3 STREET ACCORESS CITY-ST-ZIP 34. C(TY-S1-Z)P DELETE Change Addition 4 1 TITLE 4. 2 NAME STREET ADDRESS 4,3 STREET ADDRESS CITY-ST-ZIP 4.4 Chr - S1 - ZIP DELETE ☐ Change Addition 5 1 THUE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 6.1 10116 NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIF

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: ALL Y DOLL I DOWNER AR 423-97 904 629