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

Apr 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name (1)L04113 MADISON SPORTING GOODS, INC. Principal Place of Business Mailing Address 201 S. RANGE STREET 201 S. RANGE STREET MADISON FL 32340 MADISON FL 32340 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/25/1989 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2963898 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SOWELL, RICHARD ALAN 201 SOUTH RANGE STREET R2 Street Address (P.O. Box Number is Not Acceptable) MADISON FL 32340 83 City Zip Code **B**5 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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 pented name of registrired agent and trie if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE SOWELL, RICHARD A. 1 2 NAME NAME 201 S. RANGE ST. 1.3 STREET ADDRESS STREET ADDRESS MADISON FL 1.4 City - ST- ZIP CITY-ST-ZIP DELETE Change Addition STD TITLE 2.1 TITLE SOWELL, ANNETTE M. 2.2 NAME NAME 201 S. RANGE ST. STREET ADDRESS 23 STREET ADDRESS MADISON FL CITY-ST-ZIP 2.4 CRY-ST-2IP Change DELETE Addition 3.1 TOLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP Change DELETE Addition 4.1 TO LE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ... Addition Change 51 TITLE TIFLE NAME 5.2 NAME STREET ADDRESS 5.3 STREE1 ADDRESS CITY-ST-ZIP 5.4 City-ST-ZIP Change DELETE Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

CICNIATUDE:

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 eath; 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 an attraction with an address. 4-7-58

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