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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L22189

1. Corporation Name

BILL BUNTING SPORTSWEAR, INC.

Principal Place of Business Mailing Address

FILED Jan 22, 1999 8:00am Secretary of State

01-22-1999 90019 048 ***150.00



25116 OAKS BLVD 25116 OAKS BLVD LAND O'LAKES FL 34639 LAND O'LAKES FL 34639 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/12/1989 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0162697 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees Trust Fund Contribution 28 23 Country Zip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BUNTING, BILLY W. Street Address (P.O. Box Number is Not Acceptable) **25116 OAKS BLVD** LAND O'LAKES FL 34639 83 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE BUNTING, BILLY W. 12 NAME NAME 25116 OAKS BLVD. 1.3 STREET ADDRESS STREET ADDRESS LAND O'LAKES FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition [T] Change DELETE 2.1 TITLE TITLE 2.2 NAME BUNTING, BILLY W. NAME 25116 OAKS BLVD. 2.3 STREET ADDRESS STREET ADDRESS LAND O'LAKES FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change [] Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME. 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 517ITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY ST-ZIP ☐ Addition 6.1 TITLE DELETE TITLE 62 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

4. 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 tructee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an officer with all other like empowered.

SIGNATURE

BIGNING OFFICER OR DIRECTOR

Date Days

Daytime Phone #

CR2E034 (11/98)