

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L30450 1. Entity Name SHOOTING SPORTS UNLIMITED, INC.	
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Principal Place of Business
2950 PIERSON RD
W PALM BCH, FL 33414Mailing Address
2950 PIERSON RD
W PALM BCH, FL 33414

02162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE4. FEI Number
65-0161782Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent**FORDHAM, JOSEPH L.
2950 PIERSON RD
W PALM BCH, FL 33414**DO NOT WRITE
IN THIS SPACE****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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00****9.** Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**U00000060677
02/23/04-80049-009 150.00**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	FORDHAM, JOSEPH L.
STREET ADDRESS	2950 PIERSON RD.
CITY-ST-ZIP	WEST PALM BEACH, FL
TITLE	D
NAME	FORDHAM, BETTY R.
STREET ADDRESS	2950 PIERSON RD.
CITY-ST-ZIP	WEST PALM BCH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE****12.** 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 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 report 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-18-04 561-793-8787