2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000000179

1. Entity Name
OUTBACK SPORTS, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 13 PM 5:18

Principal Place of Business	Mailing Address
~~550 NORTH REO STREET, SUITE 200~~ ~~TAMPA FL 33609~~	~~550 NORTH REO STREET,~~ SUITE 200 ~~TAMPA FL 33609-1036~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2202 North West Shore Boulevard 5th Floor	~~2202 North West Shore Boulevard~~ 5th Floor
City & State: Tampa, Florida	City & State: Tampa, Florida
Zip: 33607 Country: USA	Zip: 33607 Country: USA

4. FEI Number 59-3514778 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KADOW, JOSEPH J ~~550 NORTH REO STREET, SUITE 200~~ ~~TAMPA FL 33609~~	Name Street Address (P.O. Box Number is Not Acceptable): 2202 N. West Shore Blvd., 5th Floor City: Tampa, Florida 33607 **FL** 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.

SIGNATURE _____ 4/6/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

BK 4/13

9. MANAGING MEMBERS / MEMBERS			10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SULLIVAN, CHRIS T 550 NORTH REO STREET, SUITE 200 TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 2202 N. West Shore Blvd., 5th Floor Tampa, Florida 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BASHAM, ROBERT D 550 NORTH REO STREET, SUITE 200 TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 2202 N. West Shore Blvd., 5th Floor Tampa, Florida 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MERRITT, ROBERT S 550 NORTH REO STREET, SUITE 200 TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 2202 N. West Shore Blvd., 5th Floor Tampa, Florida 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MCNEILL, LANCE 550 NORTH REO STREET, SUITE 200 TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 2202 N. West Shore Blvd., 5th Floor Tampa, Florida 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HORNE, WILLIAM 550 NORTH REO STREET, SUITE 200 TAMPA FL 33609	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 2202 N. West Shore Blvd., 5th Floor Tampa, Florida 33607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 200003218042--2 -04/21/00--01014--003 *****50.00 *****50.00

CR2E083 (9/99)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ 4/6/00 8132821225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #