2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2002 8:00 am Secretary of State **DOCUMENT #** M99000001564 1. Entity Name 05-22-2002 90203 004 ****50.00 GOLDEN EAGLE/SATELLITE ARCHERY, L.L.C. Principal Place of Business Mailing Address 4600 S.W. 41ST BLVD. 4600 S.W. 41ST BLVD. GAINESVILLE FL 32608-4934 GAINESVILLE FL 32608-4934 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 31-1576736 Not Applicable Zip Ζip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HENRY J. SPURLIN Street Address (P.O. Box Number is Not Acceptable) 4600 S.W. 41ST BLVD. GAINESVILLE FL 32608-4934 City Zip Code submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entitle SIGNATURE Henry J Spurlin (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGRM ☐ Delete TITLE ☐ Change ☐ Addition NAME THE NORTH AMERICAN ARCHERY GROUP NAME STREET ADDRESS STREET ADDRESS 4600 S.W. 41ST BLVD. CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32608-4934 TITLE **MGRM** ☐ Delete TITLE Change ☐ Addition NAME PALMER, CHARLES NAME STREET ADDRESS 312 S.E. 17TH STREET, SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP FT. LAUDERDALE FL-33316 TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition NAME SPURLIN, HENRY J NAME STREET ADDRESS 4600 S.W. 41ST BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32608-4934 TITLE Delete MGR TITLE Change Addition NAME WARD, EDWARD B STREET ADDRESS ,4600 S.W. 41ST BLVD. STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL 32608-4934 CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITLE

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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Henry J. Spurlin OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADDRESS

CITY-ST-7IP

☐ Delete

5/1/2002

(352)376-2327

☐ Change

Addition

Daytime Phone #