

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90018 049 ***150.00

DOCUMENT # P00000000188

1. Entity Name
TENOROC SHOOTING SPORTS & TRAINING, INC.

Principal Place of Business
**3755 TENOROC MINE ROAD
 LAKELAND FL 33805**

Mailing Address
**2827 PALAMORE DRIVE
 TAMPA FL 33618**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3617151**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**SMITH, MARK F
 2827 PALAMORE DRIVE
 TAMPA FL 33618**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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. 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

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **PTD SMITH, MARK F**
 STREET ADDRESS **2827 PALAMORE DRIVE**
 CITY-ST-ZIP **TAMPA FL 33618**

TITLE ☐ Delete
 NAME **VP SD SMITH, CHRISTINE-A**
 STREET ADDRESS **2827 PALAMORE DRIVE**
 CITY-ST-ZIP **TAMPA FL 33618**

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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13. 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 11 or Block 12 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

10 July 02 813 340 1934

Daytime Phone #

CR2E034 (4/02)

Attachment # P000000000/88



Division of Corporations
PO Box 6327
Tallahassee, FL 32314

10 July 2002

I am writing you in regard to the 2002 filing of my Uniform Business Report. I recently received the second notice of filing with a late fee attached. I never received the first notice which was apparently mailed in December. After speaking with a gentleman named Steve, I was told to mail this letter with an enclosed check in the amount of \$150 with the UBR and I would not be charged the late fee.

If you wish additional clarification on any point, you may call me at 813-340-1934.

Respectfully,

A handwritten signature in black ink, appearing to read "Mark Smith".

MARK SMITH
President