

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000021828

FILED
Apr 15, 2005
Secretary of State

Entity Name: ADVENTURE OUTFITTERS, INC.

Current Principal Place of Business:

2331 NW 13TH STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

2331 NW 13TH STREET
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-3663991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACKERMAN, BRYCE W
125 NORTHWEST FIRST AVENUE
SUITE 1
OCALA, FL 34470 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ACKERMAN, BRYCE W
Address: POST OFFICE BOX 3310
City-St-Zip: OCALA, FL 34478

Title: P () Delete
Name: ACKERMAN, ROBERT
Address: 2331 NW 13 ST
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT P. ACKERMAN

D

04/15/2005

Electronic Signature of Signing Officer or Director

Date