

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027267

Entity Name: SPORTSMAN'S REALTY, INC.

FILED
Aug 06, 2005
Secretary of State

Current Principal Place of Business:

97 N. BAYSHORE DRIVE
EASTPOINT, FL 32328

New Principal Place of Business:

Current Mailing Address:

PO BOX #606
EASTPOINT, FL 32328

New Mailing Address:

FEI Number: 59-3720090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, ANNE
114 APALACHEE STREET
CARRABELLE, FL 32322 US

Name and Address of New Registered Agent:

MAGIDSON, MEL C JR
528 6TH STREET
PORT ST. JOE, FL 32456 US

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: MEL MAGIDSON JR.

08/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, BOB
Address: 97 N. BAYSHORE DRIVE
City-St-Zip: EASTPOINT, FL 32328

Title: VP () Delete
Name: ALLEN, EDDA
Address: 97 N. BAYSHORE DRIVE
City-St-Zip: EASTPOINT, FL 32328

Title: D (X) Delete
Name: MARGEN, ANNE
Address: 114 APALACHEE ST
City-St-Zip: CARRABELLE, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALLEN, ROBERT D
Address: 97 N. BAYSHORE DRIVE
City-St-Zip: EASTPOINT, FL 32328

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: BOB ALLEN

P

08/06/2005

Electronic Signature of Signing Officer or Director

Date