

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091457

Entity Name: ANGLERS SUPERSTORE INC.

FILED
May 24, 2005
Secretary of State

Current Principal Place of Business:

1508 NW 183RD TERR
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

1508 NW 183RD TERR
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 86-1125963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC
92 SADBERRY RD
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

CONOVER, JOHN A
1508 NW 183RD TERRACE
PEMBROKE PINES, FL 33029 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: JOHN A CONOVER

05/24/2005

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: D () Delete
Name: CONOVER, JOHN A
Address: 1508 NW 183RD TERR
City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: CONOVER, MARY R
Address: 1508 NW 183RD TERR
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Change (X) Addition
Name: CONOVER, PAUL J
Address: 1508 NW 183RD TERR
City-St-Zip: PEMBROKE PINES, FL 33029

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: JOHN A CONOVER

D

05/24/2005

Electronic Signature of Signing Officer or Director

Date