

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0415273 AV

DOCUMENT # P07075

1. Entity Name
PANTOPS SPORTING GOODS, INC.



FILED

03 APR 15 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
14 S. SWINTON AVE.
DELRAY BEACH FL 33444

Mailing Address
14 S. SWINTON AVE.
DELRAY BEACH FL 33444

2. Principal Place of Business

255 NE 6TH AVE

Suite, Apt. #, etc.

3. Mailing Address

255 NE 6TH AVE

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

City & State

DELRAY BEACH, FL

4. FEI Number

54-1117601

Applied For

Not Applicable

Zip

33 483

Country

USA

Zip

33 483

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

SMITHER, ROBERT M., JR.
14 S. SWINTON AVE.
DELRAY BEACH FL 33444

7. Name and Address of New Registered Agent

Name

WINTZER, WILLIAM R.

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

255 NE 6TH AVE

900016087299

04/15/03--01098--016 **150.00

City

DELRAY BEACH

FL

Zip Code

33483

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 William R. Wintzer WILLIAM R. WINTZER A/T

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WORRELL, THOMAS E., JR. ☐ Delete
STREET ADDRESS 14 S. SWINTON AVE.
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE S
NAME WORRELL, ODETTE A. ☒ Delete
STREET ADDRESS 14 S. SWINTON AVE.
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE DVT
NAME SMITHER, ROBERT M., JR. ☒ Delete
STREET ADDRESS 14 S. SWINTON AVE.
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE DV
NAME FREAKLEY, EDWIN M. ☒ Delete
STREET ADDRESS 14 S SWINTON AVENUE
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE AS
NAME GOODYEAR, KIM ☐ Delete
STREET ADDRESS 125 LA POSTA ROAD
CITY-ST-ZIP TAOS NM 87571

TITLE T
NAME WINTZER, WILLIAM R ☐ Delete
STREET ADDRESS 14 S. SWINTON AVE.
CITY-ST-ZIP DELRAY BEACH FL 33444

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~PD~~ ☒ Change ☐ Addition
NAME WORRELL, THOMAS E., JR.
STREET ADDRESS 255 NE 6TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33483

TITLE USA ☐ Change ☒ Addition
NAME SAN MARTIN, MARTA
STREET ADDRESS 255 NE 6TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33483

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

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

TITLE PD ☒ Change ☐ Addition
NAME GOODYEAR, KIM
STREET ADDRESS 125 LA POSTA RD
CITY-ST-ZIP TAOS, NM 87571

TITLE A/T ☒ Change ☐ Addition
NAME WINTZER, WILLIAM R
STREET ADDRESS 255 NE 6TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33483

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILLIAM R. WINTZER REQUIRED

WILLIAM R. WINTZER A/T 4/14/03 (561) 243-2400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)