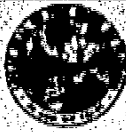


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

DOCUMENT # P19498

(5)

1. Corporation Name

BEAR ARCHERY INC.

95 MAY -1 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**4600 S.W. 41ST BLVD.
GAINESVILLE FL 32608-4999
US**

Mailing Address
**4600 S.W. 41ST BLVD.
GAINESVILLE FL 32608-4999
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/03/1988

3a. Date of Last Report
05/01/1994

4. FEI Number
51-0305227

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 **32608-4934**

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when restoring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	SMITH JR., CHARLES T.
STREET ADDRESS	4600 SW 41ST BLVD.
CITY - ST - ZIP	GAINESVILLE FL
TITLE	S
NAME	WHITE, JOSEPH J.
STREET ADDRESS	4600 SW 41ST BLVD.
CITY - ST - ZIP	GAINESVILLE FL
TITLE	T
NAME	WARD, EDWARD B.
STREET ADDRESS	4600 SW 41ST BLVD.
CITY - ST - ZIP	GAINESVILLE FL
TITLE	VSD
NAME	HEMPSTEAD, GEORGE H. III
STREET ADDRESS	99 WOOD AVE S
CITY - ST - ZIP	ISELIN NJ
TITLE	AS
NAME	BARRE, STEVEN C.
STREET ADDRESS	99 WOOD AVE S
CITY - ST - ZIP	ISELIN NJ
TITLE	V
NAME	SIMOND, GARY L
STREET ADDRESS	4600 S.W. 41ST BLVD.
CITY - ST - ZIP	GAINESVILLE FL

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	RUSHTON, JAMES D.	
1.3 STREET ADDRESS	4600 SW 41ST BLVD.	
1.4 CITY - ST - ZIP	GAINESVILLE, FL 32608-4999	
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP	32608-4999	
3.1 TITLE		☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP	32608-4999	
4.1 TITLE	V, AS, D	☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP	08830	
5.1 TITLE		☒ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP	08830	
6.1 TITLE		☒ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP	32608-4999	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edward B. Ward

Edward B. Ward, Treasurer

4/28/95

(904)376-2327

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Telephone Number)