


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P29033** (8)
1. Corporation Name
TIDEWATER POLICE & SPORTSMAN SUPPLIES, INC.

Principal Place of Business
**7328 WARWICK BLVD.
NEWPORT NEWS VA 23607**

Mailing Address
**7328 WARWICK BLVD.
NEWPORT NEWS VA 23607**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/24/1990

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

4. FEI Number
54-1069264

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
**POWELL, THOMAS L.
211 E. CALL STREET
P.O. BOX 1674
TALLAHASSEE FL 32302**

10. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____


12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	KHOURY, SAMUEL L.	
STREET ADDRESS	7328 WARWICK BLVD.	
CITY-ST-ZIP	NEWPORT NEWS VA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	KHOURY, SHELBY J	
STREET ADDRESS	7328 WARWICK BLVD.	
CITY-ST-ZIP	NEWPORT NEWS VA	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	KHOURY, LEON S	
STREET ADDRESS	7328 WARWICK BLVD.	
CITY-ST-ZIP	NEWPORT NEWS VA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SALES, JEANNIE	
STREET ADDRESS	7328 WARWICK BLVD.	
CITY-ST-ZIP	NEW PORT NEW VA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Sales	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Mac Elvinzton	
1.3 STREET ADDRESS	7328 Warwick Blvd.	
1.4 CITY-ST-ZIP	Newport News, VA 23607	
2.1 TITLE	Retail Sales	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Donna Waltrip	
2.3 STREET ADDRESS	7328 Warwick Blvd.	
2.4 CITY-ST-ZIP	Newport News, VA 23607	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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:  /Shelby Khoury - Treasurer 1/20/98 (800) 533-1511

CR2E034 (10/97)