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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000023054 (8)

ACADEMY INDOOR GUN RANGE, INC.

FILED Apr 10 1997 8:00am Secretary of State



3750 INVESTMENT LANE RIVIERA BEACH FL 33404 US 2. Principal Place of Business 21 Suite, Apt. #, etc		26. Mailing Address Suite, Apt. #, etc.		 3. Date Incorporated or Qualified 03/25/1993 4. FEI Number 65-0401525 5. Certificate of Status Desired 	3a. Date of Last Report 04/10/1996 Applied For Not Applicable 58.75 Additional Fee Regulred		
City & State)	City & State			6. Election Campaign Financing		.00 May Be
	Palm Beach, Fr	- 28 West F	DIM BO	ash, FL	Trust Fund Contribution	pure	ded to Fees
Zip 24	Country 25	Zip 29	Country 30			Yes No	der s. 199.032,
	9. Name and Address of Curren	l Registered Agent			10. Name and Address of New Re	gistered Agent	
	'S, J E		81	Name			
3750 INVESTMENT LANE				62 Street Address (P.O. Box Number is Not Acceptable)			
RIVI	ERA BEACH FL 33404		83	·····			
			63				
			B4		0, 0,	FL 85	Zip Code
14 Elizeupst I	to the provisions of Sections 607 050	2 and 607 1508 Florida St	tatutes the show	CURST Premerle Corne	retion submits this statement for the	ournose of chang	ing its registere
SIGNATURE	Signature, typed or printed name of negistured ago.	int and title if applicable	5, Florida Statute (NOTE: Registered Ag			DATE	
12.	OFFICERS AN		13.	·	ADDITIONS/CHANGES TO OFFIC		
TiTLE	PD DILTS, J E	☐ DELETE				L∷ Cha	Tuda TT Your
NAME Executive and the second of the second	161 MICHAELS COURT		1.2 NAME	4000000			
STREET ADORESS	JUPITER FL		1.3 STREET				
CITY-ST-ZIP TITLE	VP	DELETE	1.4 CITY - S 2.1 TITLE	11 - ZII'		Chi	ange Additi
NAME	DILTS, REBECCA A.		22 NAME				
STHEFT ADDRESS	161 MICHAELS COURT		2.3 STREET	ADDRESS			
CHY+ST-ZIP	JUPITER FL		2 4 CHY-)	•		
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NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ADDRESS			
City - St - ZIP			3.4. CITY-	ST-ZIP			<u> </u>
TITLE		☐ DELETE	4.1 Title			Cha	ange 🔲 Additi
NAME			4. 2 NAME				
STREET ADORESS			4.3 STREE	ADDRESS			
CITY - S1 - 2#			4.4 CITY - 1	ST-ZIP			
TOLE		DELETE	II.			[] Chi	ange 🔲 Additi
NAME			5.2 NAME				
STREET ADDRESS			53 STREE	ADDRESS			
CITY-ST-7P			5.4 City-	ST-ZIP		····	<u></u>
TITLE		☐ DELETE	61 TITLE			☐ Chi	ange 🔲 Additi
NAME			6.2 NAME	ľ			
STREET ADDRESS			6.3 STREE	ADDRESS			
CITY+ST-ZIP			6.4 CITY-	ST - ZIP			

14. Let 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: