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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000001174 (9)

THE GUN CONNECTION. INC.

Principal Place of Business Mailing Address 5450 N "W" ST PO BOX 8475 PENSACOLA FL 32505 PENSACOLA FL 32505 2. Principal Place of Business 2a. Mailing Address

FILED May 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/31/1993 4. FEI Number Applied For 59-3217918 21 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name William WILLIAM T. HARDY 1725 PENNINGTON LANE Street Address (P.O. Box Number is Not Acceptable) 82 MILTON FL 32571 83 City 84 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 reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition HARDY, DENNIS T NAME 1.2 NAME 7476 MOBILE HWY STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32526 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition HARDY, WILLIAM T NAME 22 NAME **5071 PENNINGTON LN** STREET ADDRESS 2 3 STREET ADDRESS MILTON FL 32571 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE HARDY, MARY R NAME 3.2 NAME 615 N SELLERS DR STREET ADDRESS 3.3 STREET ADDRESS MILTON FL 32570 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TOLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. Thereby 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.

Madec