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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOMODOG17040

| 1. Corporation ODDBAL | | 017049 | | | |
|---|---|--|--|--|---|
| Principal Place | of Business | Mailing Address | | 1 40016830 410 10111 01011 00111 00111 | Tillet einer imflit marti diben eine innt. |
| ODDBALLS. INC. 5401 EAST BUS 98 PARKER FL 32404 | | ODDBALLS, INC. 5401 EAST BUS 98 PARKER FL 32404 | | DO NOT WRITE IN THIS SPACE | |
| US | V | US | | 3. Date Incorporated or Qualifed | |
| 1 | , | | | 02/28/1994 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 59-3226859 | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certifcate of Status Desired | \$8.75 Additional Fee Required |
| City & State | <u> </u> | 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 the current year | ar Intangible |
| 24 | 25 | 29 30 | o | Personal Property Tax. | ☐ Yes ☐ No |
| | 9. Name and Address of Curren | t Registered Agent | 041 41 | 10. Name and Address of New Registe | red Agent |
| 82 Street Ad | | | | Aymond S. Beck ddress (P.O. Box Number is Not Acceptable) | |
| PARKER FL 32404 | | | 83 | 01 8. 1505 40 | |
| | | | | | Se Tin Code |
| | | | 84 City Pc | | FL 85 Zip Code ろみ404 |
| 11. Pursuant office or re agent. I a | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga | 2 and 607.1508, Florida Statutes, of Florida. Such change was autitions of, Section 607.0505, Florid | , the above-hamed c norized by the corpor | corporation submits this statement for the purporation's board of directors. I hereby accept the a | se of changing its registered appointment as registered |
| SIGNATURE | Signature, types or printed name of registered agei | S Deck (NOTE & | egistered Agent signature rec | DAI | 18-44 FE |
| 12. | | ID DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICER | S AND DIRECTORS IN 12 |
| TITLE | PS | ☐ DELETE | 1.1 TITLE | President, Secretary | Change ☐ Addition |
| NAME | JONES, VELMA J. | | 1.2 NAME | Velma J. Jones | • |
| STREET ADDRESS | 1306 EVERGREEN CT | | 1.3 STREET ADDRESS | 162 13420 Dr. | 77 157 |
| CITY-ST-ZIP | PANAMA CITY FL 32404 | | 1.4 CITY-ST-ZIP | Panama City, Fl | 32404 |
| TITLE | VT . | DELETE | 2.1 TITLE | Vice President, Tro | CSCChange Addition |
| NAME | JONES, HARRISON W. | | 2.2 NAME | Raymond S. Beck 5401 East Bus 98 | <u>.</u> |
| STREET ADDRESS | 1306 EVERGREEN CT | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | PANAMA CITY FL 32404 | | 2.4 CITY-ST-ZIP | Parker FI 3240 | ☐ Change ☐ Addition |
| TITLE | | ☐ DELETE | 3.1 TITLE | | C surviyo C |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP 4.1 TITLE | | ☐ Change ☐ 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 |
| MAME | | | 6.2 NAME | | |

CITY-ST-ZIP 14. 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS