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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

NAME

STREET ADDRESS

14. I do hereby certify that the information supplied with this filing doe information indicated only is abnual report of supplemental annual tam an officer or directly of the corporation of the receiver or trus

DOCUMENT # P95000022861 (5)

HAVE GUN- WILL TRAVEL, INC.

5893 WESTBOURGH COURT 5893		Mailing Address 5893 WESTBOURGH COURT NAPLES FL 34112-8803	ľ			
				3. Date Incorporated or Qualified 04/01/1995	3a. Date of Last Report 01/23/1996	
2. Principal P	lace of Business	2a. Maing Address 26		4. FEI Number 65-0570904	Applied For Not Applicable	
Suite, Apt	#, etc	Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	0	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25		Country 30		Yes No	
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Agent		
TOOMEY, JAMES M 5893 WESTBOURGH COURT NAPLES FL 33962-8803			81 Name			
			82 Street Add	<u>'</u>		
			83			
ĺ			84 City		FL 85 Zip Code -870	
agent La	am famil ar with, and accept the o	bligations of, Section 607 0505, Floodage and the Tapp Gable (NOTE	rida Statutes. Registered Agent signature req		DATE	
12.	OFFICERS	AND DIRECTORS DELITE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition	
TITLE NAME	TOOMEY, JAMES M	□ pttric	1.1 TITLE 1.2 NAME		Change C Addition	
STREET ADDRESS	5893 WESTBOURGH COUR	ıT	1.3 STREET ADDRESS			
CITY - ST-2IP	NAPLES FL 83962-8803	••	1.4 CITY- ST- ZIP		34112-8823	
TITLE	VS	DELETE	2 º TITLE		Change Addition	
NAME	TOOMEY, DEBORAH L		2.2 NAME			
STREET ADDRESS	5893 WESTBOURGH COUR	ग	2.3 STREET ADDRESS		34112-8803	
CITY-SI-ZP	NAPLES FL 33902 -8803		2.4 CITY - ST - ZIP			
TIFLE		☐ DELETE	31 HILE		☐ Change ☐ Addition	
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY - 51 - 2IP		DELETE	3.4. Crty-St-ZiP 4.1 Title		Change Addition	
NAME			4. 2 NAME			
STREET ACCRESS	1		4 3 STREET ADDRESS		}	
CITY-ST-ZIP			4.4 C(TY - S1 - Z(P		·	
TITLE		☐ DFLETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CiTY+\$I-7IP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	

IGNATURE: SAMES M. TOOMEY BASILENT 1-6-97 941-775-0156

6.3 STREET ADDRESS

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the inual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.4 CITY - ST - 7IP