FILE NOW: FILING FEE AFTER MAY 1 IS \$55D.00

PROFIT CORPORATION **ANNUAL REPORT**

1997

Principal Place of Business 402 NW 10TH AVENUE GAINESVILLE FL 32001

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

23

Zip 24

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000034184 (8)

GATOR MILITARY OUTFITTERS, INC.

HOMEWOOD, STEPHAN 3434 NW 15TH PL **GAINESVILLE FL 32605**

FILED May 06 1997 8:00am Secretary of State

A PROPERRY NO TRANSPORTE DE LA CONTRACTOR DE LA CONTRACTO

f Business Mailing Address				I (Battabl tin Islan Aliti Batti Catti Batab 14414 Bilah tidat tatit alah 1881			
	3424 NW 15TH PLACE GAINESVILLE FL 32605-4825 US						
30					3. Date Incorporated or Qualified	3a. Date of Last Report	
					04/27/1995	08/	12/1996
Businoss	2a. Mailing Addres	SS					Applied For
	26				59-3309383		Not Applicable
	Suite. Apt. #, e	lc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fecs
Country 25	Zip 29	30 Cou	intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WOOD, STEPHAN NW 15TH PL SVILLE FL 32605			81	ame			
			82	Street Address (P.O. Box Number is Not Acceptable)			
			83				
			84	ity		FI	85 Zip Code
	Country 25 ame and Address of Cu DD, STEPHAN 15TH PL	3424 NW 15TH PL GAINESVILLE FL 3 US 2a. Mailing Addres 26 Suite. Apt. #, e 27 City & State 28 Country Zip 29 ame and Address of Current Registered Agent DD, STEPHAN 15TH PL	3424 NW 15TH PLACE GAINESVILLE FL 32605-4825 US Business 2a. Mailing Address 26 Suite. Apt. #, etc. 27 City & State 28 Country Zip Cout 25 29 30 ame and Address of Current Registered Agent DD, STEPHAN 15TH PL	3424 NW 15TH PLACE GAINESVILLE FL 32605-4825 US 2a. Mailing Address 26 Suite. Apt. #, etc. 27 City & State 28 Country 25 29 30 ame and Address of Current Registered Agent DD, STEPHAN 15TH PL LE FL 32605	3424 NW 15TH PLACE GAINESVILLE FL 32605-4825 US Business 2a. Mailing Address 26 Suite. Apt. #, etc. 27 City & State 28 Country 25 29 30 ame and Address of Current Registered Agent DD, STEPHAN 15TH PL LE FL 32605 83	Mailing Address 3424 NW 15TH PLACE GAINESVILLE FL 32605-4825 US 3. Date Incorporated or Qualified 04/27/1995 3. Date Incorporated or Qualified 04/27/1995 4. FEI Number 59-3309383 Suite. Apt. #, etc. 27 City & State 28 City & State 28 Country 29 30 Country 4. Fei Number 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution 8. This corporation has flability for in Florida Statutes Country 25 29 30 Trust Fund Contribution 10. Name and Address of New Reg DD, STEPHAN 15TH PL 48 Street Address (P.O. Box Number is Not Acceptab 81 Name 82 Street Address (P.O. Box Number is Not Acceptab	Address 3424 NW 15TH PLACE GAINESVILLE FL 32605-4825 US 3. Date Incorporated or Qualified O4/27/1995 5. Certificate of Status Dosired 5. Certificate of Status Dosired City & State City & State 28 Country 7/ip Country 8. This corporation has flability for intangible Florida Statutes Florida Statutes Pres Qualified 10. Name and Address of New Registered Agent DD, STEPHAN 15TH PL LE FL 32805

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's greature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change ___ Addition DELE 1E 1.1 DILE TITLE HOMEWOOD, STEPHAN 1.2 NAME NAME 3424 NW 15 PLACE STREET ADDRESS 1,3 STREET ADDRESS **GAINESVILLE FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2110L€ TITLE HOMEWOOD, LINDA 2.2 NAME NAME 3424 NW 15 PLACE 2 3 STREET ADDRESS STREET ADDRESS **GAINESVILLE FL** 2 4 CHTY - \$1 - ZIP CITY-ST-ZIP Change Addition DELFTE 3.1 HILE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4111111 TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE ___ Change Addition 5.11ITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 C(1Y-S1-Z)F CITY-ST-ZIP Change Addition | DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I do 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 signalure 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 harne appears in Block 12 or Block 13 if changed or on an attachment with an address

4/21/0/07

352-3360-3216