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

PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000044164 (8)

HARTMAN'S SPORTS ZONE, INC.

Principal Place of Business Mailing Address 1815 SE HWY 19 1815 SE HWY 19 **CRYSTAL RIVER FL 34429** CRYSTAL RIVER FL 34429-9065 3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1995 04/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 1801 NW Hwy 19 1801 NW Hwy 19 59-3325113 Not Applicable

Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired #585 #585 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Crystal River, FL 23 28 Trust Fund Contribution Added to Fees Crystal River, FI Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 34428 **34428** ☐ Yes ☐ No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CRIDER, JOHN 521 W. FORT ISLAND TRAIL STE A 82 Street Address (P.O. Box Number is Not Acceptable) **CRYSTAL RIVER FL 34429** В3

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.

**B4** 

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1.1 TITLE HARTMNA, GERALD H NAME 1.2 NAME Gerald H. Hartman 1815 SW HWY 19 STREET ADDRESS 1.3 STREET ADDRESS 1801 NW Hwy 19 **CRYSTAL RIVER FL** CITY-ST-ZIP 1.4 CHY- ST- ZIP Crystal River, FL 34428 DELETE TITLE VSTD 2.1 TITLE Change Addition HARTMAN, SUZANNE NAME 2.2 NAME 1815 SE HWY 19 1801 NW Hwy 19 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP CRYSTAL RIVER FL Crystal River, FL 34428 2.4 CITY-\$1-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - S1 - 7IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP \_\_\_ DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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: Gerald H. Hartman

Surafxhat

3.26-97

352-795-5535

2E034 (9/96)

Zip Code

**FILED** 

Apr 24 1997 8:00am

Secretary of State