FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000047443 (3)**

1. Corporation Name

DIAMONDBACK RANGE SAFETY PRODUCTS, INC.

Principal Place of Business
2922 ELDER ST
TITUSVILLE FL 32796

Mailing Address
2922 ELDER ST
TITUSVILLE FL 32796

2. Principal Place of Business
21 1431 VICTORIA BLVD
Suite, Apt. #, etc.
22
City & State
23 ROCKLEDGE
Zip 24 32955
Country 25 USA

2a. Mailing Address
26 1431 VICTORIA BLVD
Suite, Apt. #, etc.
27
City & State
28 ROCKLEDGE
Zip 29 32955
Country 30 USA

3. Date Incorporated or Qualified
06/15/1995

3a. Date of Last Report

4. FEI Number
59-3322716
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BAUSMAN, JAMES
2922 ELDER ST
TITUSVILLE FL 32796

10. Name and Address of New Registered Agent

81 Name
RICK BOYLE
82 Street Address (P.O. Box Number is Not Acceptable)
1431 VICTORIA BLVD
83
84 City
ROCKLEDGE FL
85 Zip Code
32955

11. Pursuant to the provisions of Section 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: Rick Boyle
RICK BOYLE PRESIDENT
DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	BAUSMAN, JAMES	
STREET ADDRESS	2922 ELDER ST	
CITY-ST-ZIP	TITUSVILLE FL 32796	
TITLE	D	☐ DELETE
NAME	BOYLE, RICK	
STREET ADDRESS	2922 ELDER ST	
CITY-ST-ZIP	TITUSVILLE FL 32796	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PD	☒ Change ☐ Addition
2.2 NAME	RICK BOYLE	
2.3 STREET ADDRESS	1431 VICTORIA BLVD	
2.4 CITY-ST-ZIP	ROCKLEDGE, FL 32955	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Rick Boyle
RICK BOYLE PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #