

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000078320 (5)

1. Corporation Name

WITHLACOOCHEE ROD & GUN, INC.



Principal Place of Business

123 E NOBLE
BUSHNELL FL 33513

Mailing Address

123 E NOBLE
BUSHNELL FL 33513

3. Date Incorporated or Qualified

10/11/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAMILTON, RONNIE
8405 SW 44TH PLACE
BUSHNELL FL 33513

81

Name

BRET K. HAMILTON

82

Street Address (P.O. Box Number is Not Acceptable)

PO Box 302 W. CENTRAL AVE.

83

84

City

Bushnell

FL

85

Zip Code

33513

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

Bret K. Hamilton

(NOTE: Registered Agent's separate signature is not required)

5-1-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
ALSOBROOK, ROBERT K
STREET ADDRESS 123 E NOBLE
CITY-ST-ZIP BUSHNELL FL 33513

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME D
HAMILTON, BRET
STREET ADDRESS 8405 SW 44TH PL
CITY-ST-ZIP BUSHNELL FL 33513

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME D
HAMILTON, RONNIE
STREET ADDRESS 8405 SW 44TH PL
CITY-ST-ZIP BUSHNELL FL 33513

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Bret K. Hamilton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-96

DATE

Signature Stamp

CR2E034 (12/95)