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Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # P95000096312 (0)

GEORGE SHINN SPORTS OF FLORIDA, INC.

SIGNATURE: Wayne J. DeBlander

142 SPY GLASS LANE 142 SPY GLASS LANE JUPITER FL 33477 JUPITER FL 33477-4037 3. Date Incorporated or Qualified 3a. Date of Last Report 12/20/1995 03/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0631948 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zio Country $Z_{\rm ID}$ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes XNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY 81 Name 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) 82 TALLAHASSEE FL 32301-2525 83 84 City Zip Code 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 Signature, typed or protec name of registered agent and stell approache (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THILE □ DELETE 1.1 TITLE DP Change Addition NAME SHINN, GEORGE I 1.2 NAME ONE HIVE DR STREET ADDRESS 1.3 STREET ADDRESS 100 Hive Drive CHARLOTTE NC CITY - S1 - ZIP 1.4 City-St-ZiP TITLE DELETE 2.1 TITLE Addition Change NAME STOLPEN, SPENCER D 2.2 NAME ONE HIVE DR STREET ADDRESS 2.3 STREET ADDRESS CHARLOTTE NC CITY - ST - ZIE 2. 4 CITY - ST - ZIP TITLE DVST DELETE Addition 3.1 TITLE Change DEBLANDER, WAYNE J NAME 100 Rive Drive ONE HIVE DR STREET ADDRESS 3.3 STREET ADDRESS CHARLOTTE NO CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE TITLE 4.1 TITLE DVP ☐ Change Addition NAME 4. 2 NAME Roger A. Schweickert STREET ADORESS 4.3 STREET ADDRESS 100 Hive Drive CITY-ST-ZIP 4.4 CITY - ST-ZIP Charlotte, NC 28217 DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY - ST - ZIP 54 CITY-ST-ZIP TITLE DELETE 6.1 DILE Change Addition 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.

Indu 1/7/97 704-357-0252 Dayline Phone

FILED
Jan 15 1997 8:00am
Secretary of State

