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FILED

May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000004304 (7)

1. Corporation Name
BOOMERANG PINS, INC.



Principal Place of Business
13635 CORDONA DRIVE
JACKSONVILLE FL 32225

Mailing Address
13635 CORDONA DRIVE
JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 303 Edgewater Branch Dr.

Suite, Apt. #, etc.

22 City & State
23 Jacksonville, FL

24 Zip 32259 Country US

2a. Mailing Address

26 303 Edgewater Branch Dr.

Suite, Apt. #, etc.

27 City & State
28 Jacksonville

29 Zip 32259 Country US

3. Date Incorporated or Qualified

01/11/1996

4. FEI Number

59-3353651

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

MCCLURE, HAL C
13635 CORDONA DRIVE
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name MCCLURE, HAL C.
82 Street Address (P.O. Box Number is Not Acceptable)
303 Edgewater Branch Dr.
83
84 City Jacksonville FL 85 Zip Code 32259

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 Hal McClure

President

4-29-98

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HAL MCCLURE
STREET ADDRESS 13635 CORDONA DR
CITY-ST-ZIP JACKSONVILLE FL

TITLE VP ☐ DELETE

NAME KERRY MCCLURE
STREET ADDRESS 13635 CORDONA DR
CITY-ST-ZIP JACKSONVILLE FL

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 303 Edgewater Branch Dr.
1.4 CITY-ST-ZIP Jacksonville, FL 32259

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 303 Edgewater Branch Dr.
2.4 CITY-ST-ZIP Jacksonville, FL 32259

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

14. I 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.

CR2E034 (10/97)

4-29-98 287-0337