

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90569 024 \*\*\*150.00

DOCUMENT # P96000009801



1. Entity Name  
 RICHARD OUTDOORS, INC.

Principal Place of Business: 1122 HALLAMWOOD TRIAL SOUTH, LAKELAND, FL 33813  
 Mailing Address: 1122 HALLAMWOOD TRIAL SOUTH, LAKELAND, FL 33813

24055388

2. Principal Place of Business: 4913 PLEASANT Hollow TRL  
 Suite, Apt. #, etc.  
 3. Mailing Address: 4913 PLEASANT Hollow TRL  
 Suite, Apt. #, etc.



04232004 Chg-P CR2E034 (10/03)

City & State: LAKELAND, FL  
 City & State: LAKELAND, FL

4. FEI Number: 59-3357771  
 Applied For: Not Applicable

Zip: 33811 Country: FL  
 Zip: 33811 Country: FL

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 DELANEY, RICHARD  
 1122 HALLAMWOOD TRIAL SOUTH  
 LAKELAND, FL 33813

7. Name and Address of New Registered Agent  
 Name:  
 Street Address (P.O. Box Number is Not Acceptable):  
 4913 PLEASANT Hollow TRL  
 City: LAKELAND FL Zip Code: 33811

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when re-instating) DATE: \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  
 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D <input type="checkbox"/> Delete	NAME: DELANEY, RICHARD	TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: 4913 PLEASANT Hollow TRL
STREET ADDRESS: 1122 HALLAMWOOD TRIAL SOUTH	CITY-ST-ZIP: LAKELAND, FL 33813	STREET ADDRESS: 4913 PLEASANT Hollow TRL	CITY-ST-ZIP: LAKELAND, FL 33811
TITLE: VP <input type="checkbox"/> Delete	NAME: DELANEY, KEVIN P	TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: 4913 PLEASANT Hollow TRL
STREET ADDRESS: 1122 HALLAMWOOD TRIAL SOUTH	CITY-ST-ZIP: LAKELAND, FL 33813	STREET ADDRESS: 4913 PLEASANT Hollow TRL	CITY-ST-ZIP: LAKELAND, FL 33811
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME:
STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS:	CITY-ST-ZIP:
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME:
STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS:	CITY-ST-ZIP:
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STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS:	CITY-ST-ZIP:
TITLE: <input type="checkbox"/> Delete	NAME:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME:
STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS:	CITY-ST-ZIP:

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin P. Delaney KEVIN P. DELANEY VP 4/22/04 863-644-4084  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #