FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000066592 (2)

HI HAT SPORTING GLAYS, INC.

SPORTING EXPEDITIONS, INC. Mailing Address 11708 FRUITVILLE ROAD 11708 FRUITVILLE ROAD SARASOTA FL 34240 SARASOTA FL 34240 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/09/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0698174 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country B. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 TURNER-JAMES L D. GENTILE SBMAL 1200 SOUTH ORANGE AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34238 83 84 Zip Code 34205 BRADENTON 602 and \$07.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered to of Florina Buch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered to print Section 607.0505, Florida Statutes. 11. Pursuant to the # **SIGNATURE** (NOTE Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE PS' Change Addition TITLE 1.1 TITLE TURNER, JAY F NAME 1.2 NAME 4816 2ND AVE DR NW STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 1.4 CITY - ST - 7IP X DELETE TITLE CD 2.1 TITLE Change Addition TURNER, CHUCK 2.2 NAME 11708 FRUITVILLE RD STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 41 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 8000024320 ##Ghange DELETE TITLE 5.1 TITLE Addition -04/08/98--01014--015 5.2 NAME ***150.00 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

14. Thereby 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 port 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 trystee empowared 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 an attachment with an address.

64 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

JAY F. TURNER

1/12/98

941-371-5797

FILED

Apr 07 1998 8:00am

Secretary of State