PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P96000074005**

1. Corporation Name

LAND'S PAINTBALL OUTPOST, INC.

Principal Place of Business	
117 SPRINGWOOD CIR	

Mailing Address

117 SPRINGWOOD CIR CRESTVIEW FL 32536

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90030 008 ***150.00



CRESTVIEW FL	32536	CRESTVIEW FL 32536					
\				DO NOT WRITE IN THIS	S SPACE		
				3. Date incorporated or Qualifed			
				09/06/1996			
2. Principal Pi	ace of Business	2a. Mailing Address	, 5	4. FEI Number	Applied For		
21 447	Apple Dr.	26 447 App	le Dr.	59-3400753	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22		27			Fee Required		
City & State	³,,	City & State	,	6. Election Campaign Financing	\$5.00 May Be		
23 CYES	triew, FL	28 Crestview	1, FC	Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year Ir			
24 <i>325</i>		29 32536 30		Personal Property Tax.	X Yes □ No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
IAND LYN H							
1), LYN H		82 Street A	Address (P.O. Box Number is Not Acceptable)			
1	SPRINGWOOD CIR			447 Apple Drive			
CHE	STVIEW FL 32536		83	//			
{			84 City		85 Zip Code		
[84 City	Crestview FI	- 32536		
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.							
11/20/09							
SIGNATURE (NOTE: Registered Agent signature required when reinstating) OATE							
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12		
TITLE	D	DELETE	1.1 TITLE	President	☐ Change Addition		
NAME	LAND, JAMES K JR	,	1.2 NAME	John S. Stuckey			
STREET ADDRESS	117 SPRINGWOOD CIR		1.3 STREET ADDRESS	1117 Apple Drive			
CITY-ST-ZIP	CRESTVIEW FL 32536		1.4 CITY-ST-ZIP	Cyestyley FL 325	536		
TITLE		☐ DELETE	2.1 TITLE		Change Addition		
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME			3.2 NAME		11		
STREET ADDRESS			3.3 STREET ADDRESS				
į Į			3.4. CITY-ST-ZIP		}		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
'''''					- · -		

C/TY-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, with all other like empowered.

6.4 CITY-ST-ZIP

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



Change

☐ Change

Addition

☐ Addition