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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000075536

1. Corporation Name

l	BULLSEYE GUN SHUP, INC					
			e i e e e e e			
ļ	Principal Place of Business		Mailing Address			
İ	15 FAST LIBERTY STREET		15 FAST LIBERTY STREET			

FILED Jan 29, 1999 8:00am **Secretary of State**

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Principal Plac	ce of Business	Mailing Address	 .		din raner friår ende	11110 0111 1891	
15 EAST LIBE	RTY STREET	15 EAST LIBERTY STREET		, .			
BROOKSVILLE	FL 34601	BROOKSVILLE FL 34601		DO NOT WRITE IN TI	JIS SDACE	•	
		•	_	3. Date Incorporated or Qualifed	113 SFACE		
	:		•	09/09/1996		1	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Apr	olied For	,
1		26	*	59-3401244		Applicable	Š
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			\$8.75 A		;
2		27	•	5. Certifcate of Status Desired	Fee Re	quired	
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00	May Be	
3		28		Trust Fund Contribution	Added to		
Zip	Country	Zip	Country	8. This corporation owes the current year			
4	25		30	Personal Property Tax.		No.	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Register	ed Agent		
RES	SNICK, PETER R	Market B. Mark And Charles	81 Name	·			
SULIS	EAST LIBERTY STREET		82 Street A	Address (P.O. Box Number is Not Acceptable)			
	OOKSVILLE FL 34601		83	198 A 24 C 288 A 2 B 20 C 28 C	Barrace and Barrace	100 P. S. W. V.	
. 4		•	65	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
			84 City	9 (1 (A) (85 Zip C	ode	
44 Duration	to the accelerant of Spetians 607 0503	Lond 607 4500 Florida Statuta	a the shore served a	Formation automite this statement for the surround	of observing its a	ro mintous d	
office or	registered agent, or both, in the State o	of Florida. Such change was au	thorized by the corpo	corporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as reg	istered	
agent. I a	am familiar with, and accept the obligati	ions of, Section 607.0505, Flori	da Statutes.		•	1	
SIGNATURE	Signature, typed or printed name of registered agent	and title if positionals (ACCT).	Desistand Agent size store as	quired when reinstating)			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12	é
TITLE	D						
NAME		☐ DELETE	1.1 TITLE		☐ Change	Addition	7
STREET ADDRESS	RESNICK, PETER R	DELETE	1.1 TITLE 1.2 NAME	(i.) 38/H			4.144
	RESNICK, PETER R 15 EAST LIBERTY STREET	□ DELETE	1.2 NAME				10004000
•	15 EAST LIBERTY STREET	DELETE	1.2 NAME 1.3 STREET ADDRESS				100 A 1/4 A
CITY-ST-ZIP	I	☐ DELETE	1.2 NAME				1447-400TOOO
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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 of 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 an all patachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

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