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 # P96000085294

1. Corporation Name

RIDGE OUTDOORS USA, INC.

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90068 020 ***150.00



			·				
Principal Place of Business Mailing Address							
2310 SOUTH BAY STREET EUSTIS FL 32726	POST OFFICE BOX 389 EUSTIS FL 32726			DO NOT WRITE IN TH	IS SPACE		
				3. Date Incorporated or Qualifed			1
				10/14/1996			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Ar	pplied For	
2821 S. BAY ST.	26 P.O. BOX 389			59-3412018		ot Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<u> </u>		=5-Certificate of Status Desired		Additional	-
22	27					equired	
City & State	City & State			6. Election Campaign Financing	•	May Be	1
23 EUSTIS, FL	28 EUSTIS, FL			Trust Fund Contribution		to Fees	┨
Zip Country	Zip	Cou	itry	8. This corporation owes the current year	Intangible	□No	
24 32726 25	29 32727-0389 3	10		Personal Property Tax. 10. Name and Address of New Registere			ł
9. Name and Address of 0	Jurrent Registered Agent		81 Name	10. Name and Address of New Rogiston	o rigoni		١.
GRANGER, ROBERT C JR							▎`
2310 SOUTH BAY STREET			82 Street Addr	ress (P.O. Box Number is Not Acceptable)			
EUSTIS FL 32726		ļ	83				1
							1
			84 City	F		Code	
44 December to the requisions of Sections 6/	37 0502 and 607 1508 Florida Statutes	the at	nove-named corp	position authorite this statement for the purpose	of changing its	s registered	1
office or registered agent or both in the	State of Florida, Such change was aut	norized	by the corporation	on's board of directors. I hereby accept the ap	pointment as ri	egistered	=
agent. I am familiar with, and accept the	obligations of, Section 607.0505, Flond	ja Statt	tes.				
SIGNATURE Signature, typed or printed name of registr	and egent and title if applicable (NOTE: 8	enistered	Agent signature require	d when reinstating) DATE			. ا
	RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12] }
TITLE D	☐ DELETE	1.1 TIT	LE		Change	Addition	}
NAME BAKER, ROY L		1.2 NA	ME				;
STREET ADDRESS 1619 IRMA ROAD		1.3 ST	REET ADDRESS				8
CITY-ST-ZIP EUSTIS FL 32726		1.4 CI	Y-ST-ZIP				18
TITLE D	☐ DELETE	2.1 TIT	LE		Change	Addition	۱ ٔ
NAME GRANGER, ROBERT C JA	₹	2.2 NA	ME				
STREET ADDRESS 2900 JOANNA DRIVE		2.3 ST	REET ADDRESS				
CITY ST-ZIP - EUSTIS-FL-32726		2.4 CI	ry:ST-ZIP				=
TITLE	☐ DELETE	3.1 TI	LE:		☐ Change	☐ Addition	
NAME		3.2 NA	ME				
STREET ADDRESS		3.3 ST	REET ADDRESS				
CITY-ST-ZIP		3.4. CI	ry-st-zip				-
TITLE	DELETE	4,1 T1	LE		☐ Change	Addition	
NAME	•	4. 2 N	WE				
STREET ADDRESS		4.3 ST	REET ADDRESS				
CITY-ST-ZIP		4.4 CF	Y-ST-ZIP				-
TITLE	☐ DELETE	5.1 TI	L		☐ Change	☐ Addition	l
NAME	•	5.2 NA	i				1
STREET ADDRESS	·		REET ADDRESS				
CITY-ST-ZIP		_	Y-ST-ZIP		 _		1
TITLE	☐ DELETE	6.1 TI			☐ Change	☐ Addition	
NAME		6.2 NA					1
STREET ADDRESS			REET ADDRESS				
OFN 07 710	\sim \sim	6.4 CF	Y-ST-ZIP				1

I hereby certify that the information supplied with this filing does not gralify 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 injuries 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 receive of 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 attacking if you are didress, with all other like impowered. 14. I hereby certify that the information supplied with

SIGNATURE: