


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

APPROVED

97 JUN 25 AM 8:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra M. Motham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P96000087245</b> 1. Corporation Name <b>Top Gun Farm, Inc.</b>			
Principal Place of Business <b>7849 SW 73RD STREET</b> <b>OCALA, FL 34476</b>		Mailing Address	
2. Principal Place of Business 21 <b>7849 SW 73RD STREET</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>PO BOX 770802</b> Suite, Apt. #, etc.	
22 City & State 23 <b>OCALA, FL</b>		27 City & State 28 <b>OCALA, FL</b>	
24 Zip <b>34476</b>		25 Country <b>USA</b>	
29 Zip <b>34477-0802</b>		30 Country <b>MARION</b>	
9. Name and Address of Current Registered Agent <b>MARGARET MCFARLAND</b> <b>7849 SW 73RD STREET</b> <b>OCALA, FL 34476</b>			
10. Name and Address of New Registered Agent			
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.			
SIGNATURE <i>Margaret McFarland</i> (NOTE: Registered Agent signature required when re-issuing) 6/23/97			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			

14. I do 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.

SIGNATURE: *Kenneth W. McFarland*

4-22-97 352-873-9443

CR2E034 (9/96)