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

**PROFIT** CORPORATION ANNUAL REPORT

1999



## DOCUMENT # PQ700041780

FILED Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90224 049 \*\*\*150.00 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State **DIVISION OF CORPORATIONS** 

1. Corporation	TA SPORTS, INC.	741700								
Principal Place of Business Mailing Address						)	III 88III 8IE	#C 11#11 \$88	I <b>W</b> I ( <b>m</b> 131	88(1144)
000 S. TAMIAMI TR. #108 3800 S. TAMIAMI TRAIL										
ARASOTA FL 3		#312				DO NOT WRITE IN THIS SPACE				
		SARASOTA FL 34239				3. Date Incorporated or Qualifed				
						· ·				ſ
O Driveigal D	lace of Business	Za Mailing Address	2a. Mailing Address			05/12/1997 4. FEI Number		77	Apoli	ed For
Z. Principal P	lace of Business	<u> </u>	Halling Addiess			65-0751781	Not Applicable			
Suite, Apt.	# etc	Suite Apt # etc.	Suite, Apt, #, etc.			T		\$8.7		ditional
<del>-,</del>	m, 6tc.	<b>├</b>	27			5. Certifcate of Status Desired			Requ	
City & Stat		City & State				6. Election Campaign Financing		-\$5.0	00 м	av Be -
3		28		_		Trust Fund Contribution			ed to	•
Zip	Country	Zip	Cour	itry		8. This corporation owes the current	year Inta	ıngible	_	
4	25	29	30			Personal Property Tax.		Yes		]No
1	9. Name and Address of Current					10. Name and Address of New Rec	istered A	gent		
				81	Name					
KING, CLIFFORD M			1	82	Street Addres	ss (P.O. Box Number is Not Acceptable	e)	···		
1800	SECOND STREET SUITE 855						-,			
SARA	ISOTA FL 34236		Ţ	83			<del>-</del>			
			ļ	84	City			85 2	Zip Co	de
				04	City		FL	65  -	.ip 00	
SIGNATURE	m familiar with, and accept the obligat	and title if applicable. (NOTE: I	Registered A	_	ignature required		DATE		~~~	
12.			13.		<del></del>	ADDITIONS/CHANGES TO OFFIC	ERS AN	Chan		Addition
TITLE			1.1 111					L] Citali	iy <del>c</del>	
NAME	LONG, BRAD E				}					
STREET ADDRESS	3800 S. TAMIAMI TR. #312				DDRESS					
CITY-ST-ZIP			_	Y-\$T-2	ZIP			[] Chan		[] Addition
TITLE	C	DELETE 2.1 T						Colon	igo	LJ //dditon
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NAME			3.2 NA		DD0500					
STREET ADDRESS					DORESS					}
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NAME					DODESO					
STREET ADORESS	(				DDRESS					t
CITY-ST-ZIP		☐ DELETE	4.4 CIT	Y-ST-2	ZIF			Char	nge	Addition
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NAME	Ì	•	•		DDRESS					
STREET ADDRESS		•		Y-ST-7						
CITY-ST-ZIP TITLE	<del> </del>	DELETE	6.1 Til				<u>-</u>	Char	1ge	Addition
NAME	į		6.2 NA	ME						1
STREET ADDRESS			6.3 ST	REETA	DDRESS					}
WINGLING COUNTRY	1		_							

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 trastee empewered 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.

JIRED

6.4 CITY-ST-ZIP

**SIGNATURE:** 

941-365-2244

CR2E034 (11/98)