


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 09, 2003 8:00 am
Secretary of State

05-09-2003 90145 002 ***150.00

DOCUMENT # p97000047875	
1. Entity Name Florida Outdoors, Inc.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 12945 Vanderbilt Dr. Suite, Apt. #, etc. # 206		3. Mailing Address P.O. Box 110375 Suite, Apt. #, etc.	
City & State Naples FL		City & State Naples FL	
Zip 34110	Country	Zip 34108	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3453247	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Kris W. Thoenke	
	Street Address (P.O. Box Number is Not Acceptable) 12945 Vanderbilt Dr. # 206	
	City Naples	Zip Code FL 34110

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Kris W. Thoenke* **DATE** 6 May 03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSVT KRIS THOEMKE 12945 Vanderbilt Dr #206 NAPLES, FL 34110	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kris W. Thoenke* **DATE** 6 May 03 **239-777-8383**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/02)