

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

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000095847 (4)

1. Corporation Name

Longbrook Sporting Goods Corp.

Principal Place of Business

5770 ENTERPRISE PARKWAY
FORT MYERS FL 33905

Mailing Address

5770 ENTERPRISE PARKWAY
FORT MYERS FL 33905



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 11/10/1997	4. FEI Number 65-0794778	Applied For ☐ Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No
22 City & State	27 City & State	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	
23 Zip	28 Country	29 Zip	30 Country	

9. Name and Address of Current Registered Agent AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134	10. Name and Address of New Registered Agent 81 Name WINNEBALD, JEANNIE 82 Street Address (P.O. Box Number is Not Acceptable) 9662-21 HALYARDS CT. 83 84 City FT. MYERS FL 85 Zip Code 33919
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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 *Jeannie Winnebald* DATE 4-6-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	PSD
NAME	LANGENBACH, KLAUS	1.2 NAME	LANGENBACH, KLAUS
STREET ADDRESS	5770 ENTERPRISE PARKWAY	1.3 STREET ADDRESS	BACHSTRASSE 14
CITY-ST-ZIP	FORT MYERS FL 33905	1.4 CITY-ST-ZIP	59530 LIPPSTADT GERMANY
TITLE	VS	2.1 TITLE	VS
NAME	WINNEBALD, JEANNIE D	2.2 NAME	WINNEBALD, JEANNIE D.
STREET ADDRESS	5770 ENTERPRISE PARKWAY	2.3 STREET ADDRESS	9662-21 HALYARDS COURT
CITY-ST-ZIP	FORT MYERS FL 33905	2.4 CITY-ST-ZIP	FT. MYERS, FL 33919
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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:

4-6-98 941-694-5325

CR2E034 (10/97)