## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT DOCUMENT # P98000054109** JERRY'S INDOOR ARCHERY RANGE AND ARMY SURPLUS, INC.

**FILED** May 08, 2008 08:00 AN Secretary of State



Principal Place of Business

Mailing Address

801 N.W. 4TH AVE. OCALA, FL 34475 801 N.W. 4TH AVE. OCALA, FL 34475



05052008

No Chg-P

CR2E034 (11/05)

4. FE! Number 59-3520229

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

WILEMON, SHAYNE 3409 NE 97TH ST RD ANTHONY, FL 32617

## DO NOT WRITE IN THIS SPACE

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 (NOTE Registered Agent signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating).					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CUTY-ST-ZIP	D WILEMON, MICHAEL S 3409 N.E. 97TH ST. RD ANTHONY, FL 32617				U00000950233 06/03/08-80060-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
ITLE NAME STREET ADDRESS CITY-ST-ZIP				,in	THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					

SHAYNE IND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR