

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 09, 1999 8:00 am
Secretary of State

06-09-1999 90021 010 ***150.00

DOCUMENT # P98000067321

1. Corporation Name

SHOOT TO WIN, INC.

Principal Place of Business

938 NORTH COLLIER BLVD.
MARCO ISLAND FL 34145

Mailing Address

938 NORTH COLLIER BLVD.
MARCO ISLAND FL 34145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1998

4. FEI Number

59-3525945

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☒ No

2. Principal Place of Business

21 571 S. COLLIER BLVD

Suite, Apt. #, etc.

22 2nd Floor

City & State

23 MARCO Island FL

Zip

24 34145

Country

25 U.S.A

2a. Mailing Address

26 PO Box 2452

Suite, Apt. #, etc.

27

City & State

28 MARCO Island FL

Zip

29 034146

Country

30 USA

9. Name and Address of Current Registered Agent

STONIER, DAVID R
938 NORTH COLLIER BLVD.
MARCO ISLAND FL 34145

10. Name and Address of New Registered Agent

81 Name

RHONDA STONIER

82 Street Address (P.O. Box Number is Not Acceptable)

571 S. COLLIER BLVD

83

84 City

MARCO Island

FL

85 Zip Code

34145

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

Rhonda G. Stonier

RHONDA G. STONIER

6/1/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
RHONDA G. STONIER ☐ DELETE
1012 ANGLERS COVE #207
MARCO ISLAND FL 34145

TITLE NAME STREET ADDRESS CITY-ST-ZIP
JASON CENTRELLA ☐ DELETE
5135 Cedar Spring Dr #201
Naples FL 34110

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT - SECRETARY ☒ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
CHANGE

2.1 TITLE VICE PRESIDENT - ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
TREASURER

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

Rhonda G. Stonier

RHONDA G. STONIER

6/1/99

941-394-5323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PRESIDENT

CR2E034 (11/98)

0461702