

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

01-09-2003 90111 043 ***150.00

DOCUMENT # P99000076593

1. Entity Name

FIELD-STREAM ENTERPRISES INC.



Principal Place of Business
250 WOODBURY PINES CIRCLE
ORLANDO FL 32823

Mailing Address
250 WOODBURY PINES CIRCLE
ORLANDO FL 32823

60002208



2. Principal Place of Business

250 WOODBURY PINES CIRCLE
Suite, Apt. #, etc.

3. Mailing Address

250 WOODBURY PINES CIRCLE
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

59-3594840

Applied For

Not Applicable

Zip

32828

Country

USA

Zip

32828

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WRIGHT, ANTHONY
250 WOODBURY PINES CIRCLE
ORLANDO FL 32823

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **WRIGHT, ANTHONY**
STREET ADDRESS **250 WOODBURY PINES CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32823**

TITLE **D** ☐ Delete
NAME **WRIGHT, KRISTIN**
STREET ADDRESS **250 WOODBURY PINES CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32823**

TITLE **D** ☐ Delete
NAME **WRIGHT, WARNELL**
STREET ADDRESS **250 WOODBURY PINES CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32823**

TITLE **CP** ☐ Delete
NAME **WRIGHT, RALPH JR**
STREET ADDRESS **2256 BLUE SAPPHIRE CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE **CP** ☐ Delete
NAME **WRIGHT, DANIEL**
STREET ADDRESS **101 JAMES WILLIAMS ROAD**
CITY-ST-ZIP **NEWBERRY SC 29108**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **WRIGHT, ANTHONY**
STREET ADDRESS **250 WOODBURY PINES CIRCLE**
CITY-ST-ZIP **ORLANDO, FL 32828**

TITLE **V** ☒ Change ☐ Addition
NAME **WRIGHT, KRISTIN**
STREET ADDRESS **250 WOODBURY PINES CIRCLE**
CITY-ST-ZIP **ORLANDO, FL 32828**

TITLE **D** ☒ Change ☐ Addition
NAME **WRIGHT, WARNELL**
STREET ADDRESS **4927 BIG HORN ST.**
CITY-ST-ZIP **ORLANDO, FL 32819**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other title empowered.

SIGNATURE:

ANTHONY WRIGHT

01-07-03

321-689-2063

Date

Daytime Phone #

CR2E034 (10/02)