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Mar 26 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S11214

(1)

1. Corporation Name  
PIONEER SPORTS, INC.

Principal Place of Business

8442 S FED HWY  
PT ST LUCIE FL 34952  
US

Mailing Address

8442 SO. FEDERAL HWY.  
PT. ST. LUCIE FL 34952-3306  
US



2. Principal Place of Business

21 1714 SE. AIRES LN.  
22 PORT ST. LUCIE, FLA  
23 City & State  
24 34984  
25 St. Lucie  
26 34985  
27 Country

2a. Mailing Address

26 P.O. BOX 8086  
27 Suite, Apt. #, etc.  
28 PT. ST. LUCIE, FL.  
29 City & State  
30 St. Lucie

3. Date Incorporated or Qualified  
11/05/1990

3a. Date of Last Report  
08/05/1996

4. FEI Number

59-3042631

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

WARREN, MAURICE E.  
1714 SE AIRES LN  
PT ST LUCIE FL 34984

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Maurice E. Warren

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DT	DELETE
NAME	RILEY, DAVID C.	
STREET ADDRESS	292 S W OAKRIDGE DR	
CITY-ST-ZIP	PORT ST. LUCIE FL	
TITLE	PD	DELETE
NAME	WARREN, MAURICE E.	
STREET ADDRESS	1714 S.E. AIRES LANE	
CITY-ST-ZIP	PORT ST. LUCIE FL	
TITLE	DS	DELETE
NAME	ROWLEY, JANE	
STREET ADDRESS	1143 S W ITHICA	
CITY-ST-ZIP	PT ST LUCIE FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
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 do 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 included 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: MAURICE E. WARREN  
Maurice E. Warren

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar. 21, 1997 561-340-3139

CR2E034 (9/96)