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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # V62

V62089

(0)

THE TRADING POST, INC.

Principal Place of Business

Mailing Address

9120 N.W. 13TH STREET GAINESVILLE FL 32006 9120 N.W. 13TH STREET GAINESVILLE FL 32653-1035

FILED May 08 1997 8:00am Secretary of State



Suite Appl #, etc. Suite Suite Appl #, etc. Suite Suite Appl #, etc. Suite			US				<u> </u>			
Principal Practice of Espansies								L.		
Spite Apt # old Spite Apt								04/29/1996		
Suite	2. Principal Pi	lace of Business	2a. Mailing Address				The state of the s		1	
City & State	11						59-3140525			
Added to Fees	,						6. Certificate of Status Desired	1 1 4 =		
Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand to five provisions of Sections 607,0502 and 607,1508. Florida Statutes Pursuand corporations submits this statement for the purpose of changing its registered great fair familiar with representation of the purpose of changing its registered capture of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered and representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with representation of the purpose of changing its registered fair familiar with repres		9	City & State				6. Election Campaign Financing		\$5.0	0 May Be
9. Name and Address of Current Registered Agent WARD, PETER H. 4001 NEWBERRY RD 4C-1 GAINESVILLE FL 32807 83 Street Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code 1. Furnament in the provision of Sections 607 0-00 and 807,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of Sharings as registered agent, to both in the Street Florida, Such change was authorized by the corporation submits this statement for the purpose of Sharings as registered agent, to both, in the Street Florida, Such change was authorized by the corporation submits this statement for the purpose of Sharings as registered agent, and accept the obthigations of, Section 607,0505. Florida Statutes. IGNATURE 100	3		28				Trust Fund Contribution			
WARD, PETER H. 4001 NEWBERRY RD 401 NEWBERRY RD 402 Street Address (P.O. Box Number is Not Acceptable) 51 Street Address (P.O. Box Number is Not Acceptable) 52 Street Address (P.O. Box Number is Not Acceptable) 53 Street Address (P.O. Box Number is Not Acceptable) 54 City 55 Zip Code 55 Zip Code 56 Zip Code 57 STZP 58 Zip Code 59 Zip Code 50	Ζφ	Country	Zip	Çou	intry		8. This corporation has liability for	intangible t	ax under	s. 199.032,
Name and Address of Current Registered Agent	4	25	29	30			Florida Statutes] Yes 🔲	No	
WARD, PETER H. 4001 NEWBERRY RD #C-1 GANNESVILLE FL. 32607 88 City FL 85 Zipcode 1. Pursuant in the provisions of Sections 607.05.02 and 607.15.08. Forrida Statules, the above-named corporation submits this statement for the purpose of changing its 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, and an internal with, and accept the obligations of, Section 607.05.5 Registered agent due to internal with, and accept the obligations of, Section 607.05.5 Registered agent agent are internal with, and accept the obligations of, Section 607.05.5 Registered agent agent are internal with a composition of the purpose of changing its registered office or registered accept the obligations of, Section 607.05.5 Registered accept the displacement of the purpose of changing its registered office or registered accept the obligations of, Section 607.05.5 Registered accept to the corporation's board of directors. I hereby accept the appointment as registered office of the corporation's board of directors. I hereby accept the appointment as registered office of the corporation's board of directors. I hereby accept the appointment as registered office of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment a		9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	gistered A	gent	
4001 NEWBERRY RD #C-1 GAINESVILLE FL 32607 14 City FL 15 City FL 16 Zip Code 16 City FL 17 Pursuant in the provisions of Socilions 607,0502 and 607,1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the exponitionent dependence of the control of Roofs associated by the corporation's board of directors. I hereby accept the exponitionent as registered object or registered accept the objections of Section 07,0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the exponitionent as registered object or registered registere	WAI	RN PETER H			81	Name				
### City						Change A date	(D.O. D. M	.1_\		
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 agent, or both, in this State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, an familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. International Company of the composition o					82	Street Addi	ress (P.O. Box Number is Not Acceptat	ole)		
1. Pursuant to the provisions of Sections 607 0502 and 607,1508. Florida Statutes, the above named corporation submite 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. IGNATURE 2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2. OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. STEPHENSON, BRIAN 16. STEPHENSON, BRIAN 16. STEPHENSON, BRIAN 16. ALACHUA FL 32615 16. VD 17. ALACHUA FL 32615 17. ALACHUA FL 32615 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ST. 2P 19. STEPHENSON, BRIAN 19. STEPH					83					
1. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statuties, the above-named corporation submite this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505. Florida Statutes. IGNATURE 2. OFFICERS AND DIRECTORS 18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 19. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 11. TITLE 1. TITLE 2. Change Addition AME HIPP, JOHN C 22. SEE TH AVENUE 1. STREET ADDRESS 3. ST. 2P ALACHUA FL 32815 1. COTY-SI-2P 1. TITLE 2. TITLE 2. TITLE 2. TITLE 2. TITLE 3. TITLE 4. COTY-SI-2P 4. COTY-SI-2P 4. COTY-SI-2P 4. COTY-SI-2P 4. COTY-SI-2P 4. COTY-SI-2P 4. TITLE 4. TITLE 4. TITLE 4. TITLE 4. TO Change Addition AND AND AND AND AND AND AND AN	GAI	NESVILLE PL 3200/								
other 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 amiliar with, and accept the obligations of, Section 607.0505. Florida Statutes. IGNATURE 2. OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PDD DELETE 1.1 TILE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 AME HIPP, JOHN C 12 NAME 13 STREET ADDRESS ALACHUA FL 32615 1.4 CITY-SI-ZPP ALACHUA FL 32615 1.4 CITY-SI-ZPP ALACHUA FL 32615 2.2 NAME 2.2 STREET ADDRESS BITH AVENUE 3.3 STREET ADDRESS ALACHUA FL 32615 3.4 CITY-SI-ZPP ALACHUA FL 32615 3.5 STREET ADDRESS ALACHUA FL 326811 4.5 ST					84	City			65 Zi	p Code
other 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 run familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Interest	.,				<u> </u>			<u> </u>	ــلـــــــــــــــــــــــــــــــــــ	
Change		m familiar with, and accept the oblig	ations of, Section 607.050	5, Florida Sta	tutes.		, , , , , , , , , , , , , , , , , , , ,	v		
PCD	CHAINTY OF IL				d Agent	signature requi				
HIPP, JOHN C	12.	OFFICERS AN					ADDITIONS/CHANGES TO OFFIC		_	
13 STREET ADDRESS 14 CMY-ST-ZP 13 STREET ADDRESS 14 CMY-ST-ZP 14 CMY-ST-ZP 15 STREPHENSON, BRIAN 15 STREPHENS	TITLE	PCD	LJ DELETE	E 1.1 T)	TLE			l	Chang	Additio
ALACHUA FL 32615	NAME	HIPP. JOHN C		1.2 N	AME					
ALACHUA FL 32615 ILLE VD DELETE 2 TITLE VD Addition STEPHENSON, BRIAN RT. 4, BOS 481 ALACHUA FL 32615 ALACHUA FL 32615 SD DELETE 3 TITLE Change Addition MADEAU, AMANADA H 32 NAME NADEAU, AMANADA H 32 NAME NADEAU, AMANADA H 32 NAME NACHUA FL 32615 ALACHUA FL 32615 OTHER ADDRESS ALACHUA FL 32615 ALACHUA FL 32615 ALACHUA FL 32615 ALACHUA FL 32615 OTHER ADDRESS ALACHUA FL 32615 ALACHUA FL 32615 ALACHUA FL 32615 ALACHUA FL 32615 OTHER ADDRESS ALACHUA FL 32615 DELETE 4.1 TITLE Change Addition Addit	STREET ADDRESS	927 S.E. 6TH AVENUE		1.3 S	TREET AL	DORESS				
DELETE 2.1 TITLE	CITY ST-ZIP			14.0	ITY-ST-	. Z‡P				
STEPHENSON, BRIAN 22 NAME 23 STREET ADDRESS ALACHUA FL 32615 2 4 CITY-ST-ZIP ALACHUA FL 32615 2 4 CITY-ST-ZIP Change Addition	TIFLE		DELETE						Chang	Additio
REFLADORESS RT. 4, BOS 481 ALACHUA FL 32615 2 4 CITY-ST-ZIP DELETE 31 TITLE Change Addition ADDEAU, AMANADA H 32 NAME NADEAU, AMANADA H 33 STREET ADDRESS 34 CITY-ST-ZIP DELETE TOWNSEND, KEN TOWNSEND, KEN TOWNSEND, KEN ASTREET ADDRESS ALACHYA FL 32681 DELETE 4.1 TITLE Change Addition Addition	NAME:	7.5		2.2 N	IAME .		Su e			
ALACHUA FL 32615 SD DELETE S1 TITLE S2 NAME ADEAU, AMANADA H S72 S.E. 6TH AVENUE ALACHUA FL 32615 S3. STREET ADDRESS ALACHUA FL 32615 ALACHUA FL 32615 S4. CITY-ST-ZIP DELETE A1 TITLE Change Addition Additi						nnaess				
ITTE SD DELETE 31 TITLE 32 NAME Addition NADEAU, AMANADA H 32 NAME 32 NAME 32 NAME 32 NAME 32 NAME 33 STREET ADDRESS ALACHUA FL 32615 34 CITY-ST-ZIP TOWNSEND, KEN 42 NAME TOWNSEND, KEN 42 NAME 5650 N.W. 193RD STREET 43 STREET ADDRESS OTY-ST-ZIP OF DELETE 5.1 TITLE 1. Change Addition NAME 52 NAME 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP THE 1. Change Addition NAME 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP THE 1. Change Addition NAME 55	l l									
MADEAU, AMANADA H 972 S.E. 6TH AVENUE 33 STREET ADDRESS ALACHUA FL 32615 34 CITY-ST-ZIP INLE D TOWNSEND, KEN 42 NAME TOWNSEND, KEN 43 STREET ADDRESS 6550 N.W. 193RD STREET ORANGE LAKE FL 32681 DELETE DELET			Deleti	***************************************		-ZIP			Chann	a Additio
17 17 17 17 17 17 17 17			r rereu					L	viiailÿ	, L. Audillo
ALACHUA FL 32615 3.4. CITY-ST-ZIP	NAME			1						
DELETE	STREET AUDRESS			3.3 \$	TAEET AL	DDRESS				
TOWNSEND, KEN	CITY-ST ZiP	ALACHUA FL 32615				- 216				
10 10 10 10 10 10 10 10	THLE	D	☐ DELETE	E 4.1 TI	ITL E			Į	Chang	a 🔲 Addition
10 10 10 10 10 10 10 10	NAME	TOWNSEND, KEN		4.21	VAME					
A CITY - ST - ZIP	STHEFT ADDRESS			4.3 \$	TREET AL	DOMESS				
DELETE 5.1 TITLE	C:TY+ST+ZIP			4.4 C	aty-St-	- ZIP				
	1011		DELEVI			T			Chang	e 🔲 Additio
	NAM ⁷			5 2 N	IAME)		-		
						DOMESS				
						l				
AAMI 62 NAME THEELADDRESS 63 STREET ADDRESS			neleti			- III			Chang	e Additio
6.3 STREET ADDRESS			I'' OETEN			İ		,	viiaily	. ET MOURD
	NAMI			1		}				
64 CITY-ST-ZIP	STREET ADDRESS			63S	TARET AC	DDRESS				
	CHY+S1-ZIP			64C	aty-st-	ZIP	<u> </u>			

14. Ido hereby certify that the information supplied with this filling 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 bit in an address.

SIGNATURE

MATURE AND TYPES OF PRINTIPO NAME OF SIGNING OFFICER OF DIRECTOR

4-31.57 352 3763389