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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P98000040979

1. Corporation Name TACTICAL RESPONSE TRAINING, INC.

Principal Place of Business 12204 N.W. 122ND TERRACE ALACHUA FL 32615
Mailing Address 12204 N.W. 122ND TERRACE ALACHUA FL 32615



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 05/06/1998
4. FEI Number 59-3513297
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 - May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax.

2. Principal Place of Business 21
2a. Mailing Address 26
22 Suite, Apt. #, etc. 27
23 City & State 28
24 Zip 25 Country 29 30

9. Name and Address of Current Registered Agent
VAN WINKLE, MARY E
3844 BEE RIDGE RD. STE. 202
SARASOTA FL 34233

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 (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 columns: OFFICERS AND DIRECTORS (12), ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include VAN WINKLE, EDWARD L. and HALL, ROBERT L.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include VAN WINKLE, EDWARD L. and VAN WINKLE, TANYA L.

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 acci rate 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: Edward L. Van Winkle 1-25-99 (904) 418-3543

CR2E034 (11/98)