

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 OCT 31 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M99000001338

1. Entity Name
KTB FLORIDA SPORTS ARENA LLC

Principal Place of Business
31440 NORTHWESTERN HWY
FARMINGTON HILLS MI 48334-2654

Mailing Address
31440 NORTHWESTERN HWY
FARMINGTON HILLS MI 48334-2525

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

VICKY GOLDSTEIN
SPECIAL ASSISTANT SECRETARY

10/30/00
DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR
KT SPORTS & ENTERTAINMENT, INC.
31440 NORTHWESTERN HWY
FARMINGTON HILLS MI 48334-2654

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR
KT SPORTS & ENTERTAINMENT, INC.
1400 EDWARDS MILL ROAD
RALEIGH, NC 27607

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
200003459392--9
-11/03/00--01039--026

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
200003459392--9
-11/03/00--01039--027

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
*****50.00 *****50.00

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

by: KT Sports & Entertainment, Inc., its Manager

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER
James P. Cain, President

Date

Daytime Phone #

REINSTATEMENT

