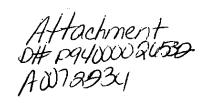
2001. UN:FORM BUSINESS REPORT (UBR)

May 30, 2001 8:00 am DOCUMENT # P94000 26532 Secretary of State 05-30-2001 90033 017 ***150.00 TIBURON ENTERTAINMENT, I'NC. Principal Place of Business Mailing Address 2301 LUCIEN WAY 2301 LUCIEN WAY STE 395 STE 395 MAITLAND, FL 32751 MAITLAND, FIL 32751 A0072234 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For *5*9-32328*5*7 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHAPPERT, JOHN C Street Address (P.O. Box Number is Not Acceptable) 2301 WCIEN WAY STE 395 MAITLAND, FL 32751 Zip Code FL 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 (NOTE: Re ;istered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! (FEE 15'\$150:00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (11/00) ☐ Addition ☐ Delete TITLE TITLE SCHAPPERT, JOHN C. NAME SCHAPPERT JOHN C 2616 ORCHARD DR. STREET ADDRESS 2616 ORCHA'RO DR. STREET ADDRESS CITY-ST-ZIP APOPKA FL 32712 CITY-ST-ZIP APOPKA FL CFO **Addition** TITLE Delete. TITLE JOE SOTHY 2301 LUCIEN WAY, STE 395 RUSS GUBLER NAME NAME 2301 LUCIEN WAY, STE 395 STREET ADDRESS STREET ADDRESS MAITLAND, FL 32751 CITY-ST-ZIE CITY-ST-ZIP Addition Delete TITLE Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change | ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. JOHN SCHAPPERT SIGNATURE:





Electronic Arts - Tiburon 2301 Lucien Way, Suite 395 Maitland, Florida 32751

Main: 407.838.8000 Fax: 407.838.8888

May 23, 2001

Division of Corporation P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam,

Attached please find the 2001 Uniform Business Report for Tiburon Entertainment, Inc., #59-3232857.

This form was lost in the mail and thus we are filing it a bit late. This is the first time I have filed this report late since this corporation's inception. Given our excellent standing, I ask you to please consider waiving the late fee. I downloaded a new form and sent our payment via FedEx as soon as I realized that we had not filed this year. Please contact me if you feel it necessary to charge the late fee so that I can get the addition funds sent over quickly as I do not want to jeopa rdize our corporate registration for 2001.

Thank you

Kelly Schappert
Kelly Schappert

Accounting Manager (407) 838 - 8531



