

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

2-7-96 B. 0828-C

DOCUMENT # P94000029019 (4)

1. Corporation Name

BALLY'S ENTERTAINMENT FLORIDA, INC.



Principal Place of Business

8700 WEST BRYN MAWR CHICAGO IL 60631

Mailing Address

8700 WEST BRYN MAWR CHICAGO IL 60631

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified 04/15/1994

3a. Date of Last Report 02/20/1995

4. FET Number 58-2114297

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 607.06(1) and 607.06(1)(a), 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 607.06(1), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12-1	NAME	CEO	<input type="checkbox"/> DELETE
12-2	STREET ADDRESS	GOLDBERG, ARTHUR M 8700 W BRYN MAWR AVE CHICAGO IL	
12-3	CITY, STATE, ZIP	P	
12-4	NAME	BARR, WALLACE R	<input type="checkbox"/> DELETE
12-5	STREET ADDRESS	PARK PLACE & THE BOARDWALK ATLANTIC CITY NJ	
12-6	CITY, STATE, ZIP	VPT	
12-7	NAME	HILLMAN, LEE S	<input type="checkbox"/> DELETE
12-8	STREET ADDRESS	8700 W BRYN MAWR AVE CHICAGO IL	
12-9	CITY, STATE, ZIP	VPS	
12-10	NAME	MURPHY, BERNARD J	<input type="checkbox"/> DELETE
12-11	STREET ADDRESS	8700 W BRYN MAWR AVE CHICAGO IL	
12-12	CITY, STATE, ZIP	VP	
12-13	NAME	DEPAUL, CAROL S	<input type="checkbox"/> DELETE
12-14	STREET ADDRESS	8700 W BRYN MAWR AVE CHICAGO IL	
12-15	CITY, STATE, ZIP	VP	
12-16	NAME	DWYER, JOHN W	<input type="checkbox"/> DELETE
12-17	STREET ADDRESS	8700 W BRYNE MAWR AVE CHICAGO IL	
12-18	CITY, STATE, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13-1	1. TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
13-2	2. NAME	Gaan, Cary	
13-3	3. STREET ADDRESS	8700 W. Bryn Mawr Avenue	
13-4	4. CITY, STATE, ZIP	Chicago, IL 60631	
13-5	5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-6	6. NAME		
13-7	7. STREET ADDRESS		
13-8	8. CITY, STATE, ZIP		
13-9	9. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-10	10. NAME		
13-11	11. STREET ADDRESS		
13-12	12. CITY, STATE, ZIP		
13-13	13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-14	14. NAME		
13-15	15. STREET ADDRESS		
13-16	16. CITY, STATE, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntary furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or separate 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 holder of a bond or employment to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 of the 1996 filing changes for on an additional filing address.

SIGNATURE:

*Carol S. DePaul*

Carol S. DePaul

Vice President 2/1/96

CR2E034 (12/95)