

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 22 AM 9:55

DOCUMENT # P94000030053 (0)

1. Corporation Name

BALLY'S FLORIDA CASINO, INC.

Principal Place of Business

Mailing Address

8700 W. BRYN MAWR
CHICAGO IL 60631

8700 W. BRYN MAWR
CHICAGO IL 60631

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

21. Suite, Apt #, etc.

26. Suite, Apt # etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23. Zip

Country

28. Zip

Country

8. The corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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 607.0602 and 607.1509, 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

Signature of Registered Agent (if registered agent is not the corporation)

Signature of Registered Agent (signature of officer or director)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: D
NAME: GOLDBERG, ARTHUR M
STREET ADDRESS: 2 EXECUTIVE DR.
CITY, ST, ZIP: SOMERSET NJ 08873

1. TITLE: Chief Exec. Officer Change Addition
12. NAME: Arthur M. Goldberg
13. STREET ADDRESS: 2 Executive Drive
14. CITY-ST-ZIP: Somerset, NJ 08873

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

21. TITLE: President Change Addition
22. NAME: Wallace R. Barr
23. STREET ADDRESS: Park Place & the Boardwalk
24. CITY-ST-ZIP: Atlantic City, NJ 08401

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

31. TITLE: Vice Pres. & Treasurer Change Addition
32. NAME: Lee S. Hillman
33. STREET ADDRESS: 8700 W. Bryn Mawr Ave.
34. CITY-ST-ZIP: Chicago, IL 60631

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

41. TITLE: Vice Pres. Change Addition
42. NAME: Carol S. DePaul
43. STREET ADDRESS: 8700 W. Bryn Mawr Ave.
44. CITY-ST-ZIP: Chicago, IL 60631

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

51. TITLE: Change Addition
52. NAME: Bernard J. Murphy V.P. and Secretary
53. STREET ADDRESS: 2 Executive Dr.
54. CITY-ST-ZIP: Somerset, NJ 08873

TITLE: Vice President
NAME: Cary A. Gaan
STREET ADDRESS: 8700 W. Bryn Mawr Avenue
CITY, ST, ZIP: Chicago, IL 60631

61. TITLE: Vice President Change Addition
62. NAME: John W. Dwyer
63. STREET ADDRESS: 8700 W. Bryn Mawr Ave.
64. CITY-ST-ZIP: Chicago, IL 60631

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(2)(b), Florida Statutes. I further certify that the information included 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 person or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or 13, as applicable, or on an attached page with an address.

SIGNATURE:

Carol S. DePaul

Carol S. DePaul

1/18/95 312/399-1300

SIGNATURE AND PRINTED OR PHOTODUPLICATED NAME OF REGISTERED OFFICER OR DIRECTOR