

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
May 09 1996 8:00 am
Secretary of State

DOCUMENT # **P95000093765 (2)**

1. Corporation Name

FUNLEAGUE GROUP, INC.



Principal Place of Business: **5405 CYPRESS CENTER DRIVE, SUITE 295 TAMPA FL 33609**
Mailing Address: **5405 CYPRESS CENTER DRIVE, SUITE 295 TAMPA FL 33609**

3. Date Incorporated or Qualified: **12/06/1995**
3a. Date of Last Report
4. FEI Number: **59-3355773**
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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CASS, NANCY J
324 HYDE PARK AVE., SUITE 375
TAMPA FL 33606**

81 Name: **Charles H. Guy, III**
82 Street Address (P.O. Box Numbers Not Acceptable): **5405 Cypress Center Dr., Suite 295**
83
84 City: **Tampa** FL 85 Zip Code: **33609**

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 607.0502, Florida Statutes.

SIGNATURE: *Charles H. Guy, III* DATE: **5/3/96**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|----------------|---|
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | GUY, CHARLES H III |
| STREET ADDRESS | 5405 CYPRESS CENTER DRIVE, SUITE 295 |
| CITY-ST-ZIP | TAMPA FL 33609 |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | FLASKEY, NICHOLAS |
| STREET ADDRESS | 5405 CYPRESS CENTER DRIVE, SUITE 295 |
| CITY-ST-ZIP | TAMPA FL 33609 |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | LOWELL, MELVYN |
| STREET ADDRESS | 5405 CYPRESS CENTER DRIVE, SUITE 295 |
| CITY-ST-ZIP | TAMPA FL 33609 |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| | |
|--------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | Flaskay, Nicholas |
| 2.3 STREET ADDRESS | 5405 Cypress Center Dr, Suite 295 |
| 2.4 CITY-ST-ZIP | Tampa, FL 33609 |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily 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 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 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.

SIGNATURE: *Charles H. Guy, III* Charles H. Guy, III 5/3/96 (813)289-3611

CR2E034 (12/95)