FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 275880

(3)

BALL MANAGEMENT COMPANY

Principal Place of Business Mailing Address 2701 E SUNRISE BLVD P O BOX 7503 #301 FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33304 US			136-7503		
US			3. Date Incorporated or Qualified 11/20/1963	3a. Date of Last Report 04/29/1996	
	Place of Business	2a. Mailing Address		4. FEI Number 59-1027230	Applied For
21 Suite, Ap	it #, etc.	26 Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable
City & Sta	ate	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country 25	Zip 29	Country 30		or intangible tax under s. 199.032,
24	9. Name and Address of Curr		[30]	10. Name and Address of New I	
GI	ENTILE, ALBERT J.		81 Name		
#3	701 E. SUNRISE BLVD. 301			Iress (P.O. Box Number is Not Accept	able)
} FI	r. Lauderdale FL 33304		83 84 City		85 Zip Code
				poration submits this statement for the	FL
agent. I SIGNATURE	am familiar with, and accept the ob Signature, typed or printed name of registered	ligations of, Section 607.0505, I	Florida Statutes. DTE Registered Agent signature requ		DATE FICERS AND DIRECTORS IN 12
12.	PS OFFICERS A	AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	GENTILE, ALBERT J	- Octob	1.2 NAME		
STREET ADDRESS	ATAL E CLIMPICE DILLO		1.3 STREET ADDRESS		
CITY ST ZIP	FORT LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	BOWER, EDWARD L.		2.2 NAME		ļ.
STREET ADDRESS			2.3 STREET ADDRESS		ļ
CHY-SI-7IP	FT. LAUDERDALE FL	— 57.676	2. 4 CITY-ST-ZIP		
TOLE	GUST, RITA M	DELETE	3.1 TOTLE		Change Addition
NAME OTOGET ADDRESS	ASAL P ALILIDIAL BLUE		3.2 NAME		
STREET ADDRESS	FT LAUDERDALE FL		3 3 STREET ADDRESS 3.4. CITY - ST- ZIP		·
CITY ST - ZIF	TV	☐ DELETE	3.4. CHY-SI-ZIP 4.1 TITLE	·	Change Addition
NAME	FIEDLER, RODNEY	prod Sancer	4. 2 NAME		
STREET ADDRESS	AZA4 E CHAINICE DIAD		4.3 STREET ADDRESS		Ì
CPY-SI-ZIP	FT LAUDERDALE FL		4.4 CITY-ST-ZIP	•	ì
TITLE		DELETE	5.1 THLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5,2 NAME		·
STREET ADDRESS	s		5.3 STREET ADDRESS]
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 T/TLE		Change Addition

62 NAME

14. Ido 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 annual report or supplemental innual 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.3 STREET ADDRESS 6.4 CITY - ST- ZIP

SIGNATURE

NAME STREET ADDRESS

CITY - ST - 2IP

en albert Gentile OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-8565

FILED

May 14 1997 8:00am

Secretary of State

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