

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90049 017 ***150.00

DOCUMENT # 275880

1. Corporation Name
BALL MANAGEMENT COMPANY

Principal Place of Business

~~2701 E. SUNRISE BLVD.~~
~~#301~~
FT LAUDERDALE FL ~~33304~~
US

Mailing Address

P O BOX 7503
FT LAUDERDALE FL 33338
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/20/1963

4. FEI Number

59-1027230

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 P. O. Box 7503

Suite, Apt. #, etc.

27

City & State

28 Ft. Lauderdale, FL

Zip

Country

29 33338

30 USA

9. Name and Address of Current Registered Agent

GENTILE, ALBERT J.

~~2701 E. SUNRISE BLVD.~~

~~#301~~

FT. LAUDERDALE FL-33304

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 2727 E. Oakland Park Blvd.

84 City

FL

85 Zip Code

33306

10. Name and Address of New Registered Agent

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME GENTILE, ALBERT J

STREET ADDRESS ~~2701 E. SUNRISE BLVD.~~

CITY-ST-ZIP FORT LAUDERDALE FL

TITLE V ☐ DELETE

NAME BOWER, EDWARD L

STREET ADDRESS ~~2701 E. SUNRISE BLVD.~~

CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME GUST, RITA M

STREET ADDRESS ~~2701 E. SUNRISE BLVD.~~

CITY-ST-ZIP FT LAUDERDALE FL

TITLE TV ☐ DELETE

NAME FIEDLER, RODNEY

STREET ADDRESS ~~2701 E. SUNRISE BLVD.~~

CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2727 E. Oakland Park Blvd., #306

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2727 E. Oakland Park Blvd., #306

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

2727 E. Oakland Park Blvd., #306

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

2727 E. Oakland Park Blvd., #306

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 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, with all other like empowered.

SIGNATURE:

Rodney W. Fiedler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Rodney W. Fiedler

4-29-99

Date

954-561-8565

Daytime Phone #

CR2E034 (11/98)

0318590