

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 331826

1. Entity Name

SPORTS PALACE INC

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90048 048 ***150.00

Principal Place of Business

Mailing Address

1100 N. WICKAM RD.
MELBOURNE FL 32936

1100 N. WICKAM RD.
MELBOURNE FL 32935-8941

2. Principal Place of Business

40 Fountain Plaza

3. Mailing Address

40 Fountain Plaza

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Buffalo, NY

City & State

Buffalo, NY

Zip

14202

Country

Erie

Zip

14202

Country

Erie

4. FEI Number

59-1305141

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

<FILE NOW!!! FEE IS \$150.00
<After MAY 1, 2000 Fee will be \$550.00 >
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PTD**
STREET ADDRESS **BIDDIX, PATRICK**
CITY-ST-ZIP **1100 N. WICKHAM**
MELBOURNE FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **40 Fountain Plaza**
CITY-ST-ZIP

TITLE ☐ Delete
NAME **VSD**
STREET ADDRESS **SULTEMEIER, RONALD A.**
CITY-ST-ZIP **438 MAIN ST.**
BUFFALO NY

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **40 Fountain Plaza**
CITY-ST-ZIP

TITLE ☒ Delete
NAME **AS**
STREET ADDRESS **SPEARS, DIANE C.**
CITY-ST-ZIP **438 MAIN ST.**
BUFFALO NY

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BISSETT, WILLIAM J.**
CITY-ST-ZIP **438 MAIN ST.**
BUFFALO NY

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **40 Fountain Plaza**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Assistant Secretary**
STREET ADDRESS **Terry C. Burton**
CITY-ST-ZIP **40 Fountain Plaza**
Buffalo, NY 14202

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Assistant Secretary**
STREET ADDRESS **Janice R. Trybus**
CITY-ST-ZIP **40 Fountain Plaza**
Buffalo, NY 14202

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald A. Sultemeier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald A. Sultemeier

Date

4-3-00 (716)858-5000
Daytime Phone #

CR2E034 (9/99)