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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 828557

(9)

REDS, INCORPORATED

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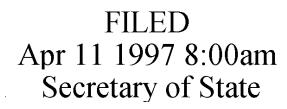
Principal Place of Business

100 RIVERFRONT STADIUM CINCINNATI OH 45202

SIGNATURE:

Mailing Address

100 RIVERFRONT STADIUM CINCINNATI OH 45202





| | | | | | 3. Date Incorporated or Qualified 08/28/1972 | 3a. Date of Les 05/30/1996 | | |
|---|--|---|----------------|--|--|-------------------------------|---|--|
| | lace of Business | 2a. Mailing Address | | \ | 4. FEI Number | | Applied For | |
| | CNERY FIELD | | ERGY | FIELD | 31-0621431 | | Not Applicable | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 | | | | | 5. Certificate of Status Desired | 7 | \$8.75 Additional Fee Required | |
| City & State CINCINNATI, OHIO 28 CINCINNAT | | | | 0110 | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip 4/52 | 20.3 Country | Zip 45202 | Country 30 | ' | | Yes No | r s. 199.032, | |
| | 9. Name and Address of Current | Registered Agent | | | 10. Name and Address of New Re | gistered Agent | | |
| CT C | ORPORATION SYSTEM | | 81 | Name | | | | |
| 1000 C DINE ICLAND DOAD | | | | | 62 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | NTATION FL 33324 | | 102 | Street Address (F.O. Box Number is Not Acceptable) | | | | |
| | | | 83 | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | <u> </u> | | | <u> </u> | |
| | | | . 84 | City | · · | FL 85 Z | ip Code | |
| 11 Purculant | to the provisions of Sections 607 0502 | and 607 1508. Florida Statu | les the abov | e-named corn | oration submits this statement for the p | 7 100 | n its registered | |
| office or r | registered agent or both in the State : | of Florida. Such change was | authorized by | the corporati | ion's board of directors. I hereby accep | ot the appointment | as registered | |
| agent. I a | m familiar with, and accept the obliga | tions of, Section 607.0505, Fl | lorida Statute | S . | | | | |
| SIGNATURE | | | 70.0 | | 4.6 | DATE | | |
| | Signature, typed or printed name of registered ager OFFICERS AND | | 13. | aut Biðusints tednir | ed when re-natating) ADDITIONS/CHANGES TO OFFIC | | ODC IN 12 | |
| 12. | PCEO | DELETE | 1.1 TELE | | ADDITIONS/CHANGES TO OFFIC | Chang | | |
| TITLE | SCHOTT, M U | Land Director | | | | CON CHARLE | الماللموليم ليي ع | |
| NAME | 100 RIVERFRONT STADIUM | | 1.2 NAME | | 100 CINERGY FIA | X | | |
| STREET ADDRESS | | | 1.3 STREET | | 100 CINERGY FIR | :~0 | | |
| CITY-SI-ZIP | CINCINNATI OH | T Dri F76 | 1.4 CITY - 5 | T- ZIP | | M 01 | . I dean | |
| TITLE | ST | DELETE | 21 TITLE | | • | (A) Chang | e Addition | |
| NAME | MARTIN, R. | | 2.2 NAME | | · | | | |
| STREET ADDRESS | 100 RIVERFRONT STADIUM | | 2.3 STREET | ADDRESS | 100 CINERGY FI | 540 | | |
| CITY-ST-ZIP | CINCINNATI OH | | 2. 4 CITY- | ST-ZIP | ···· | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | Chang | e L Addition | |
| NAME | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | 3.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY- | ST-21P | | | | |
| TITLE | | DELETE | 4.1 TITLE | | | ☐ Chang | e 🔲 Addition | |
| NAME | | | 4. 2 NAME | : | | COC | · | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | n . | ₩ | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| TOTY - ST - Z(P | | | 4.4 CITY - S | T-ZIP | ** | 4 | Tuc | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Chang | e 🔲 Addition | |
| NAME | | | 5.2 NAME | , I | • | • | | |
| OTREET ADDRESS | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY - S | 1 | , | | | |
| TITLE | | DELETE | 6.1 TITLE | | | Change | e 🔲 Addilion | |
| NAME | | | 6.2 NAME | | 20000214 | 1282 | Process of the second of | |
| 1 | | | 6.3 STREET | ADDRESS . | 20000214 -04/11/970112 | 4032 | | |
| STREET ADDRESS | | • | | | ***165.00 | · | | |
| 14 Ldo hereb | y certify that the information supplied | with this filing does not guest | 6.4 CITY-S | | in Section 119.07(3)(i), Florida Statutes | Literiber certifo th | et the | |
| Information | n indicated on this annual report or su | pplemental annual report is the receiver or trustee empoy | rue and accu | rate and that : | my signature shall have the same legal as required by Chapter 607. Florida S | l effect as if made : | inder oath: that | |

JOHN ALLEW