

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A93000000058

1. Entity Name

BRANSON ENTERTAINMENT CONCEPTS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR -6 PM 6:34

Principal Place of Business: 3044 SHEPHERD OF THE HILLS EXPWY.. #307 BRANSON MO 65616
Mailing Address: 3044 SHEPHERD OF THE HILLS EXPWY.. #307 BRANSON MO 65616



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number: 59-3158149
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LOONEY, STEPHEN R
200 S. ORANGE AVE., SUITE 3000
ORLANDO FL 32801

7. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record: **\$3,200,000.00**
10. Amount of Capital Contributions in FLORIDA to date.
11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	P93000001977
NAME	BRANSON ENTERTAINMENT CONCEPTS, INC.
STREET ADDRESS	3044 SHEPHERD OF THE HILLS EXPRESSWAY, #307
CITY - ST - ZIP	BRANSON MO 65616
DOCUMENT #	
NAME	
STREET ADDRESS	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY - ST - ZIP	B/K
STREET ADDRESS	
CITY - ST - ZIP	83/6/00
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	700003178377--5
CITY - ST - ZIP	-03/21/00--01094--013
	****535.00 ****535.00
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Peggy Stewart* **REQUIRED** 1/24/00 417-337-4405
Peggy Stewart Asst. Corp. Secretary Date Daytime Phone #

CR2E001 (1/98)