

2000 UNIFORM BUSINESS REPORT (UBR)

0002062 AF

DOCUMENT # B95000000201

1. Entity Name

TAMPA BAY ARENA, LTD.

Principal Place of Business

401 CHANNELSIDE DRIVE
TAMPA FL 33602

Mailing Address

401 CHANNELSIDE DRIVE
TAMPA FL 33602

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3316446

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



FILED

00 AUG -9 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. Name and Address of Current Registered Agent

MCGEEHEE, WILLIAM R JR.
401 CHANNELSIDE DRIVE
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Hugh Lombardi

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

401 Channelside Drive

City

Tampa

FL

Zip Code 33602

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

8/4/00

9. Capital Contributions
as Shown on record.

\$990,000.00

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 # P98000004710
NAME ALW SPORTS MANAGEMENT, INC.
STREET ADDRESS 277 ROYAL POINCIANA WAY, SUITE 135
CITY-ST-ZIP PALM BEACH FL 33480

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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08/09/00 01102 001

***578.75 ***526.25

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:

Hugh J. Lombardi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/15/00

Date

(813) 301-6700

Daytime Phone #

CR2E003 (5/00)