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May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000005156 (5)

1. Corporation Name
TPI ENTERTAINMENT, INC.



Principal Place of Business

3950 RCA BLVD
SUITE 5001
PALM BEACH GARDENS FL 33410
US

Mailing Address

3950 RCA BLVD
SUITE 5001
PALM BEACH GARDENS FL 33410-4227
US

3. Date Incorporated or Qualified
11/15/1993

3a. Date of Last Report
02/29/1996

2. Principal Place of Business

21 1727 ELM HILL PIKE
Suite, Apt. #, etc.

22 City & State
NASHVILLE TN

24 Zip
37210

Country

2a. Mailing Address

26 1727 ELM HILL PIKE
Suite, Apt. #, etc.

27 ATTN TAX DEPT

28 NASHVILLE TN

29 Zip
37210

Country

4. FEI Number
13-3479407

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 | D | <input type="checkbox"/> DELETE |
| NAME | SIU, PAUL J | |
| STREET ADDRESS | 3950 RCA BLVD, SUITE 5001 | |
| CITY - ST - ZIP | PALM BEACH GARDENS FL | |
| TITLE | DV | <input type="checkbox"/> DELETE |
| NAME | BURFORD, FREDERICK W | |
| STREET ADDRESS | 3950 RCA BLVD, SUITE 5001 | |
| CITY - ST - ZIP | PALM BEACH GARDENS FL | |
| TITLE | S | <input type="checkbox"/> DELETE |
| NAME | KENNEDY, ROBERT A | |
| STREET ADDRESS | 3950 RCA BLVD, SUITE 5001 | |
| CITY - ST - ZIP | PALM BEACH GARDENS FL | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---------------------|---------------------|--|
| 1.1 TITLE | PD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | BARBER, W. CRAIG | |
| 1.3 STREET ADDRESS | 1727 ELM HILL PIKE | |
| 1.4 CITY - ST - ZIP | NASHVILLE TN 37210 | |
| 2.1 TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | CHERT, ABRAHAM P. | |
| 2.3 STREET ADDRESS | 1727 ELM HILL PIKE | |
| 2.4 CITY - ST - ZIP | NASHVILLE TN 37210 | |
| 3.1 TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | HAYES, GREGORY A. | |
| 3.3 STREET ADDRESS | 1727 ELM HILL PIKE | |
| 3.4 CITY - ST - ZIP | NASHVILLE TN 37210 | |
| 4.1 TITLE | T | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4.2 NAME | MCDANIEL, F.E. | |
| 4.3 STREET ADDRESS | 1727 ELM HILL PIKE | |
| 4.4 CITY - ST - ZIP | NASHVILLE TN 37210 | |
| 5.1 TITLE | SD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME | LANKFORD, ROBERT M. | |
| 5.3 STREET ADDRESS | 1727 ELM HILL PIKE | |
| 5.4 CITY - ST - ZIP | NASHVILLE TN 37210 | |
| 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY - ST - ZIP | | |

14. I do 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, changed, or on an attachment with an address.

SIGNATURE:

Abraham P. Chert Jr. ABRAHAM P. CHERT JR.

4-20-97

615/231-2822

CR2E034 (9/96)