2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Principal Place of Business

1106 PALMS AIRPORT DR.

F96000006664

Mailing Address

1106 PALMS AIRPORT DR.

1. Entity Name

SHUFFLE MASTER, INC.



FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90116 029 ***150.00

LAS VEGAS N	NV 89119	LAS V US	LAS VEGAS NV 89119 US						1 1 111 1 1 111		
2. Principal F	Place of Business	3. Mai	3. Mailing Address				4 10011500 1540 10410 01711 08415 00410 4		I BIJI'N NJIJO	HILLE BEAR LUIGE	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State			4. F	El Number 41-1448495			oplied For	
Zip Country			Zip		Country		Pertificate of Status Desired		B.75 Add	ditional	
	6. Name and Address of C	urrent Registere	d Agent			7. N	ame and Address of New Rec				
					Name .						
CORPORATION SERVICE COMPANY						Street Address (P.O. Box Number is Not Acceptable)					
1201 HAY	's street		03.0017			isosoo (i .e. sox (valitical la riot Acceptable)					
TALLAHAS	SSEE FL 32301										
				(City			FL	Zip Cod	е	
8. The above the obligation	e named entity submits this stated tions of registered agent.	ment for the purp	ose of changing its	registered o	office or reg	gistered age	ent, or both, in the State of Florid	da. I am fan	niliar with,	and accept	
CICLIATION											
SIGNATURE	Signature, typed or printed name of register	ed agent and title if app	licable. (NOT	E: Registered Ag	ent signature re	equired when rei	nstating)	DATE		<u></u>	
F	ILE NOW!!! FEE IS \$150.0	nn				1					
4	r May 1, 2003 Fee will be \$5	I					9. Election Campaign Finar	~		May Be	
Make Check	k Payable to Florida Departn	nent of State					Trust Fund Contribution.		Added	I to Fees	
10,		S AND DIRECTO	RS	11.			DITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOR:	S IN 11	
TITLE	COB		X Delete	TITLE		CEO &		X] Change	Addition	
NAME	LAHTI, JOSEPH J			NAME			f, Mark L.				
STREET ADDRESS	10901 VALLEY VIEW RD			STREET A			lms Airport Dr.				
CITY-ST-ZIP	EDEN PRAIRIE MN 55344			CITY-ST-			as, NV 89119				
TITLE	CEPD		Delete	TITLE			nt & Secretary] Change	XX Addition	
NAME STREET ADDRESS	YOSELOFF, MARK L 1106 PALMS AIRPORT DR			NAME			lli, Mark A.				
CITY-ST-ZIP	LAS VEGAS NV 89119			STREET AI			lms Airport Dr.				
TITLE	SVP		☑ Delete	-			as, NV 89119		7.00		
NAME	BROOKE, DUNN		LA Delete	TITLE			Director s, Garry W.	L	Change	XX Addition	
STREET ADDRESS	1106 PALMS AIRPORT DRIV	/E		STREET AC			ayers Club Dr.				
CITY-ST-ZIP	LAS VEGAS NV 89119	_		CITY-ST-			as, NV 89134				
TITLE	CFOT		☑ Delete	TITLE		<u>-</u> ፑበ & ፕ	reasurer	Г	7 Change	Addition	
NAME	GRIFFIN, GARY W			NAME			Gerald W.	_	J	-A	
STREET ADDRESS	10901 VALLEY VIEW RD			STREET AL							
CITY-ST-ZIP	EDEN PRAIRIE MN 55344		_	CITY-ST-	ZIP L.	as Veg	lms Airport Dr. as, NV 89119				
TITLE	D		🔀 Delete	TITLE	01	utside	Director] Change	X Addition	
NAME	SUTTON, THOMAS A			NAME			Kenneth J.				
STREET ADDRESS	20330 KNIGHTSBRIDGE RO	AD		STREET AD			nding Way				
CITY-\$T-ZIP	SHOREWOOD MN 55331			CITY-ST-		ichmon					
TITLE	D DITAEN DATRICK D		■ Delete	TITLE			Director] Change	X Addition	
name Street address	Cruaen, Patrick R 16355 36TH AVE NORTH, S	TE 700		NAME CTREET AC			Howard P. fayette Road				
CITY-ST-ZIP	PLYMOUTH MN 55446	71E 700		STREET AC			rayette koad , Minnesota 5539	1			
	- Ermoonning Qutto			0111-01-4	- ા 114 ઠે	ayzald	, minnesota boby:	Ĺ		ı	

12. 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 10 or Block 11 if changed, or on an attachment with an accurate and other like exposured.

SIGNATURE:

UIRED

Daytime Phone #