## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED May 22, 2001 8:00 am

DOCUMENT # POT DODODI383						Secretary of State 05-22-2001 90800 009 ***150.00				
OGDEN	ATTRACTIONS, IN	C.								
Principal Pla	ace of Business	Mailing Address								
	NE ROAD TELD NJ 07007-26	15								
2. Principal Place of Business		3. Mailing Address				659192				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State				. FEI Number Applied Fo Not Applied Fo				
Zip	Country	Zip	Co	untry	5, 0	Certificate of Status Desired	Fee Requ	Additional uired		
	6. Name and Address of Current	Registered Agent			7. N	ame and Address of New Registered	I Agent		コ	
	ENTICE-HALL CORI AYES STREET	PORATION SYST	ΓΕΜ,	Name Street Add	dress (P.O.	ss (P.O. Box Number is Not Acceptable)				
TALLAHASSEE, FL 32301				City	FL Zip Code					
Tax filing r	Signature, typed or printed name of regis oration is eligible to satisfy its Intangit equirement and elects to do so. ria on back)	1	!! FEE   01 Fee	IS \$150.00 will be \$55	60.00	10. Election Campaign Financing Trust Fund Contribution.		.00 May Be	-	
11.	OFFICERS AND I	· ·	12.			I FIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 11	<u>ا</u> ۋ	
ITLE	VPSD PETER ALLEN	Delete	TITLE NAME	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TOTAL OF THE STATE	Chang			
TREET ADORESS	40 LANE ROAD FAIRFIELD, NJ 0	7007-2615		T ADORESS ST - ZIP					15	
TLE AME	PRESIDENT/DIREC SCOTT G. MACKIN		TITLE NAME		· ·		Chang	ge Addition	1	
TREET ADDRESS	40 LANE ROAD FAIRFIELD, NJ 0	7007-2615		ST - ZIP		_				
TLE AME TREET ADDRESS	VP/TREASURER/DI WILLIAM J. METZ 40 LANE ROAD		TITLE NAME STREE				Chang	ge Addition	1	
ITY - ST - ZIP	FAIRFIELD, NJ 0		CITY -	ST - ZIP				- The Addition		
TLE AME		Delete	NAME	ŀ			Change	e Addition		
TREET ADORESS TY - ST - ZIP				ST - ZIP						
TLE AME		Delete	TITLE NAME				Change	e Addition		
TREET ADDRESS TY - ST - ZIP				T ADDRESS ST - ZIP						
TLE AME		Delete	TITLE NAME	-			Change	e Additiол	1	
TREET ADDRESS			STREE	T ADDRESS ST - ZIP			•			
	I	h this filing does not qualify:			ted in Sec	tion 119.07(3)(i), Florida Statutes. I furt	her certify	that the	$\exists$	
information	indicated on this report or supplemental	ental report is true and accu	rate and	that my sign	ature shall	have the same legal effect as if made	under oatl	h; 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

WILLIAM J. METZGER 4

WILLIAM J. MET AND TYPED OF MANTED NAME OF SIGNING OFFICER OR DIRECTOR

STF FL32381F.1