

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000006066 (1)
 1. Corporation Name
IDEA ENTERTAINMENT, INC.



Principal Place of Business ONE GAYLORD DR. NASHVILLE TN 37214	Mailing Address ONE GAYLORD DR. NASHVILLE TN 37214
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address <i>c/o Sherrard & Roe</i>		3. Date Incorporated or Qualified 11/17/1997	
21	26	424 Church Street		4. FEI Number 62-1673308	
Suite, Apt #, etc.		Suite, Apt #, etc. Suite 2000		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State Nashville, TN		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		
		37214	USA		

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CCEO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LONDON, TERRY E	1.2 NAME	
STREET ADDRESS	2802 OPRYLAND DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN 37214	1.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRELL, DAN	2.2 NAME	
STREET ADDRESS	ONE GAYLORD DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN 37214	2.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANTON, E. MICHAEL	3.2 NAME	
STREET ADDRESS	ONE GAYLORD DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN 37214	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUNDY, ROLAND	4.2 NAME	
STREET ADDRESS	ONE GAYLORD DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN 37214	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONNOR, ROD	5.2 NAME	
STREET ADDRESS	ONE GAYLORD DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN 37214	5.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOPPER, MICHEL C	6.2 NAME	
STREET ADDRESS	ONE GAYLORD DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN 37214	6.4 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 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 if changed, or on an attachment with an address.

SIGNATURE: _____ **Rod Connor, Vice President**
 1/14/98 615/316-6331

CR2E034 (10/97)