2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F97000006066** Apr 21, 2000 8:00 am Secretary of State 1. Entity Name IDEA ENTERTAINMENT, INC. 04-21-2000 90135 007 ***150.00 Mailing Address Principal Place of Business 424 CHURCH STREET ONE GAYLORD DR. NASHVILLE TN 37214 STE 2000 NASHVILLE TN 37219-3304 AUUASUCA 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 62-1673308 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CCEO Delete ☐ Addition TITLE President 7 Lehange TITLE Tim DuBois LONDON, TERRY E NAME NAME One Craylord Drive STREET ADDRESS STREET ADDRESS ONE GAYLORD DRIVE Vesmic TN 37014 NASHVILLE TN 37214 CITY-ST-ZIP CITY-ST-ZIP Secretary **□** Addition Delete TITLE Change thomas 03. Showard HARRELL, DAN NAME 424 Church Street, Suite 2000 ONE GAYLORD DR. STREET ADDRESS STREET ADDRESS HasnineTTU 37219 CITY-ST-ZIP NASHVILLE TN 37214 CITY-ST-ZIP Vice Dresident Delete TITLE Change ☐ Addition BLANTON, E. MICHAEL Kin Canno NAME One Gaylow Drive STREET ADDRESS ONE GAYLORD DR. STREET ADDRESS NOSHATETN 37214 CITY-ST-ZIP NASHVILLE TN 37214 CITY-ST-ZIP Vice Proided Change Addition TITLE ☐ Delete TITLE Termiletanis LUNDY, ROLAND NAME ONE GAYLORD DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NASHVILLE TN 37214 CITY-ST-ZIP Nashmile TN ☐ Delete TITLE ☐ Change ☐ Addition CONNOR, ROD NAME NAME STREET ADDRESS ONE GAYLORD DR. STREET ADDRESS CITY-ST-ZIP NASHVILLE TN 37214 CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE HOPPER, MICHEL C NAME NAME ONE GAYLORD DR. STREET ADDRESS STREET ADORESS

13. 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 11 or Block 12 if changed, or on an attachmen with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: .

NASHVILLE TN 37214

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/00

615-742-4200

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