FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

[']Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F 980000 0 3079 9

National Consortium for Academics and Sports, Inc.

Principal Place of Business

3281 Sherberth Rd.
Kissimmee, Fl 34747

2. Principal Place of Business

Mailing Address

2a. Mailing Address

P.O. Box 10,000 Lake Buena Vista, Fl

32830

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90122 020 ****61.25

3. Date Incorporated or Qualifed

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 617 0503, Florida Statutes. SIGNATURE SIGNA	21		26					December 1, 199	2			
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28	City & Stat	e	City &	State				5 Certificate of Status Desired				
28	23		28							Fee Red	quired	
9. Name and Address of Current Registered Agent Richard E. Lapchick 3281 Sherberth Road Kissimmee, Florida 34747 83 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, an interfluer with, and accept the obligations of Section 617,0503, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Pursuant to the provisions of Sections 617,0503, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME STREET ADDRESS 14.0TV-51-ZP Kissimmee, Fl 34747 Change Additional Control of the composition o	Zip	Country	LZip		Country				- ₋			
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Rissimmee		-			82	Street A	Addres	s (P.O. Box Number is Not Acceptab	ole)			
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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	CITY-ST-ZIP	notification information organized with	this filing door	not qualify for the	-	,	نطي	L C a g o . I I . 60604	iurther certif	fy that the in	formation	

I nerepy certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07 (3)(f), Florida Statutes. Florida calculates 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter on an attachment with an address, with soften like empowered.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OF JIGER OR DIRECTOR

4.9.99 (407)938.303

R2E037 (11/98)