

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90037 043 \*\*\*150.00

DOCUMENT # F98000003719

1. Corporation Name  
SPORT COURT, INC.

Principal Place of Business  
939 SO 700 WEST  
SALT LAKE CITY UT 84104

Mailing Address  
939 SO 700 WEST  
SALT LAKE CITY UT 84104



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1998

4. FEI Number

91-0925797

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 P  
NAME THELE, ROBERT  
STREET ADDRESS 2563 NEFFS CIR  
CITY-ST-ZIP SALT LAKE CITY UT

☐ DELETE

TITLE V  
NAME SHAFFER, JOHN  
STREET ADDRESS 1408 EAGLE WAY  
CITY-ST-ZIP PARK CITY UT

☐ DELETE

TITLE S  
NAME PETERSON, RANDALL  
STREET ADDRESS 1767 JANELLA CIR  
CITY-ST-ZIP SANDY UT

☐ DELETE

TITLE CD  
NAME MINETTI, T G  
STREET ADDRESS 70 WEST RED OAK LN  
CITY-ST-ZIP WHITE PLAINS NY

☐ DELETE

TITLE V  
NAME SORENSON, WILLIAM  
STREET ADDRESS 70 WEST RED OAK LN  
CITY-ST-ZIP WHITE PLAINS NY

☐ DELETE

TITLE D  
NAME KOTLER, DANIEL  
STREET ADDRESS 6233 CANYON COVE DR  
CITY-ST-ZIP SALT LAKE CITY UT

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99

Date

801-972-0260

Daytime Phone #

CR2E034 (11/98)

0544363