2001 UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # F98000004755 06-19-2001 90419 001 ***300.00 BALLANTYNE OF OMAHA, INC. Principal Place of Business Mailing Address 901 CENTRAL FLORIDA PKWY ... 4350 MCKINLEY STREET 74827 CHAHA NE 68112 STE A ORLANDO FL 32824 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 47-0587703 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** 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 (NOTE: Registered Agent signature required when reinstating) 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, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) TITLE Defete TITLE ☐ Change **X** Addition WILMERS, JOHN P NAME NAME 500) JOENCEL 4350 MCKINLEY STREET STREET ADDRESS STREET ADDRESS **OMAHA NE 68112** CITY-ST-ZIP CITY-ST-ZIP Santibel IS. Addition TITLE Delete TITLE ☐ Change Q BOEGNER, RAY F William welsh # NAME GULT BLVD. 4350 MCKINLEY STREET STREET ADDRESS STREET ADDRESS 11308 20ph **OMAHA NE 68112** CITY-ST-ZIP CITY-ST-ZIP OMAha NE 68_i37 Addition TITLE TITLE ☐ Delete ☐ Change Marshal Geller FRENCH, BRAD NAME 433 N. Camdon Drive Suttle 500 4350 MCKINLEY STREET STREET ADDRESS STREET ADDRESS CITY - ST-ZIP **OMAHA NE 68112** CITY-ST-ZIP TITLE Delete TITLE TENNEY, ARNOLD S NAME NAME 122 OLD FORREST HILL ROAD, TORONTO STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CANADA M5P 2R9 NE 68112 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition ECHTENKAMP, RONALD H NAME NAME 4434 SOUTH 163RD STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP OMAHA NE 68135 CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete TITLE CHELIN, JEFFREY D NAME 260 HEATH STREET APARTMENT 505, TORONTO STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CANADA M5P 3L6 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 changed, or on an attackment with an address, with all other like empowered.

FILED Jun 19, 2001 8:00 am