

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 04, 2001 8:00 am
Secretary of State

05-04-2001 90126 021 ***150.00

DOCUMENT # F99000002178

1. Entity Name

PALACE SPORTS & ENTERTAINMENT, INC.

Principal Place of Business

Mailing Address

**TWO CHAMPIONSHIP DRIVE
AUBURN HILLS MI 48326**

**TWO CHAMPIONSHIP DRIVE
AUBURN HILLS MI 48326**

00047300



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **38-2670394**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILL, WARD & HENDERSON
ATTN: LARRY SMITH
101 E. KENNEDY BLVD. SUITE 3700 BARNETT PL
TAMPA FL 33602**

Name **Ronald Campbell**

Street Address (P.O. Box Number is Not Acceptable)

401 Channelside Dr

City **Tampa**

FL

Zip Code **33602**

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **WILSON, THOMAS S**
STREET ADDRESS **TWO CHAMPIONSHIP DRIVE**
CITY-ST-ZIP **AUBURN HILLS MI 48326**

TITLE **Executive VP** ☐ Change ☒ Addition
NAME **Daniel Hauser**
STREET ADDRESS **Two Championship Dr**
CITY-ST-ZIP **Auburn Hills MI 48326**

TITLE **VT** ☐ Delete
NAME **CAMPBELL, RONALD J**
STREET ADDRESS **TWO CHAMPIONSHIP DRIVE**
CITY-ST-ZIP **AUBURN HILLS MI 48326**

TITLE **Executive VP** ☐ Change ☒ Addition
NAME **John Ciszewski**
STREET ADDRESS **Two Championship Dr**
CITY-ST-ZIP **Auburn Hills MI 48326**

TITLE **S** ☐ Delete
NAME **GREENFIELD, SUSAN L**
STREET ADDRESS **TWO CHAMPIONSHIP DRIVE**
CITY-ST-ZIP **AUBURN HILLS MI 48326**

TITLE **VP Treasurer** ☐ Change ☒ Addition
NAME **John O'Reilly**
STREET ADDRESS **Two Championship Dr**
CITY-ST-ZIP **Auburn Hills MI 48326**

TITLE **C** ☒ Delete
NAME **SOSNICK, ROBERT**
STREET ADDRESS **20500 CIVIC CENTER DRIVE SUITE 3000**
CITY-ST-ZIP **SOUTHFIELD MI 48027**

TITLE **Asst. Treasurer** ☐ Change ☒ Addition
NAME **Paul Halpern**
STREET ADDRESS **2300 Harmon Rd**
CITY-ST-ZIP **Auburn Hills MI 48326**

TITLE **C** ☒ Delete
NAME **HEMMEIN, BRIAN**
STREET ADDRESS **20500 CIVIC CENTER DRIVE SUITE 3000**
CITY-ST-ZIP **SOUTHFIELD MI 48027**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VC** ☐ Delete
NAME **FELDMAN, OSCAR**
STREET ADDRESS **32270 TELEGRAPH ROAD SUITE 2002**
CITY-ST-ZIP **BIRMINGHAM MI 48025**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN P. O'REILLY

4/26/01

248-377-0171

Date

Daytime Phone #

CR2E034 (10/00)