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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J91488

(3)

TICKETMASTER-FLORIDA, INC.

FILED										
May 12 1998 8:00an	1									
Secretary of State										

Principal Place of Business Mailing Address					_			( ADDINED BILLD INTO	#		I BIBIL BYBIL BUT	I OF DIE 1801	
			3701 WILSHIRE BLVD										
ORLANDO FL			SUITE 700				ł						
			GELES CA <b>90</b> 010	l			ļ		DO NOT WRITE	IN THIS	SPACE		
,		U\$						<ol> <li>Date Incorporate</li> <li>09/09/1987</li> </ol>	d or Qualified				
2. Principal P	lace of Business	2a. Mailir	ng Address					4. FEI Number			A	oplied For	
21			800 SUNSET	BLVD.				<u>36-3541446</u>	<u> </u>			ot Applicable	
Suite, Apt.	#, etc	<u>-</u>	, Apt. #, etc.				1	5. Certificate of Sta	tus Desired			Additional	
22 City 9 Cyal			TH FLOOR	·								equired	
City & State	u	h n	& Slale					<ol><li>Election Campaig Trust Fund Contr</li></ol>	-	П		May Be to Fees	
Zip	Country	Zej <u>WE</u>	ST HOLLYWOO	CA Cour	ntrv			8. This corporation					
24	25	L	0069	30	,			Personal Propert				No	
	9, Name and Address of Co	urrent Registered	Agent					10. Name and Addr	ess of New Re	gistered	Agent		
PR	ENTICE-HALL CORPORATION	N SYSTEM, INC.		]+	81	Name							
110	NORTH MAGNOLIA STREE	T		- h	82	Street	Addres	s (P.O. Box Number i	s Not Acceptat	ole)	<del>_</del> ·.		
TAL	LAHASSEE FL 32301			L									
				1	83								
					B4	City					85 Zip	Code	
										<u> FL</u>	<u> </u>		
office or r	to the provisions of Sections 607 egistered agent, or both, in the S	State of Florida, Su	ch change was	authorized	by	the corr	l corpor poration	ation submit <b>s t</b> his stat n's board of <b>dir</b> ectors.	tement for the p I hereby accep	ourpose o	of changing i pointment as	ts registered registered	
agent. I a	m familiar with, and accept the c	obligations of, Sect	ion 60 <b>7.ŏ</b> 505, Fl	orida Statu	iles.				, ,	, , ,	'		
SIGNATURE	Signature, typod or printed name of register	and the different controls	ANOT	f. Dunistand	4	al riscatus	· coming	when reinstating)		DATE			
12.		S AND DIRECTORS		13.	Ager	it signature	- required	ADDITIONS/CHAN	IGES TO OFFIC		D DIRECTOR	RS IN 12	
TITLE	CO		DELETE	1.1 1 11	Œ		PRES	IDENT, CHAIRMA	N. DIRECTO		Change	Addition	
NAME	rosen, fredric			1.2 NAM	ИE			RIC D. ROSEN	,	•	••		
STREET ADDRESS	3701 WILSHIRE BLVD, ST	E 700		1.3 STR	EET A	ADDRESS	8800	SUNSET BLVD.,	7TH FLOOR	₹			
CITY-ST-ZIP	LOS ANGELES CA			1.4 CIT	Y-SI	- 7IP	WEST	HOLLYWOOD, CA	90069				
TITLE	8		☐ DELETE	2 1 TITL	.E		1				L Change	Addition	
NAME	GANTZ, NORMAN			2.2 NAM			ļ						
STREET ADDRESS	2 N. LASALLE ST. #2200					ADDRESS							
CITY-ST-ZIP	CHICAGO IL VPAS		DELETE	2. 4 CH		T-21P					<b>y</b> Change	Addition	
TITLE	GOLDSTEIN, NED S		T DECEN	3.1 TITL 3.2 NAM			VPAS				TT CHAIR	TT MOROUN	
NAME Street Address	3701 WILSHIRE BLVD, ST	F 700				ADDRESS	8800	S GOLDSTEIN SUNSET BLVD.,	7ጥዝ PT.OOD	,			
CITY-ST-ZIP	LOS ANGELES CA	_ · <del></del>		3.4. CIT			WEST	HOLLYWOOD, CA	90069	•			
TITLE	VPM		DELETE	4.1 TITL		. 2.17				<del>.</del>	Change	Addition	
NAME	DOWLESS, DONNA			4. 2 NA			1				-		
STREET ADDRESS	225 E RBINSON ST, STE	355		4.3 STR	EET #	ADDRESS			•				
CITY-ST-ZIP	ORLANDO FL			4.4 CIT1	Y-S1	- <b>Z</b> IP	<u> </u>			. <u> </u>			
TITLE	VPM		DELETE	51 TITL	.E						Change	Addition	
NAME	WOOD, TIM			5.2 NAM	ИE								
STREET ADDRESS	225 E RBINSON ST			5.3 STR	EE1 A	ADDRESS							
CITY-ST-ZIP	ORLANDO FL		Dr. ere	5.4 CIT		- ZIP	SVPT				N   05	A dans.	
TITLE	SVPT		DELETE	6.1 TITL			PALT				K Change	Addition	
NAME	KNEPPER, PETER 3701 WILSHIRE BLVD, ST	E 700		6.2 NAM		1000		R B. KNEPPER					
STREET ADDRESS	LOS ANGELES CA	E 700						SUNSET BLVD., HOLLYWOOD, CA		!			
CITY-ST-ZIP	LOU MIGLICO UM			6.4 CIT	r-SI	- {IP	147127	LOUBINOOD, CA	20003				

14. Hereby certify that the information supplied with this filing does not quality 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 exemption 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 or an attachment with an address.