2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # K49571** 1. Entity Name FLORIDA FUN ATTRACTIONS, INC. 04-27-2001 90240 003 ***150.00 Principal Place of Business Mailing Address 2791 POINCIANA BLVD 2791 POINCIANA BLVD KISSIMMEE FL 34746 KISSIMMEE FL 34746 Principal Place of Business BLUD POWCIANA DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2920442 Not Applicable 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 MEYERS, JARED N. POINCIANA **EXECUTIVE OFFICES** 2794 NORTH POINCIANA BLVD. KISSIMMEE FL 34746 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 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. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE TITLE ☐ Delete KAPLUS, ROBERT A. NAME NAME STREET ADDRESS STREET ADDRESS 3235 TOMAHAWK DR CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL TITLE Change Addition TITLE DVT Delete NAME NAME MEYERS, NEIL STREET ADDRESS STREET ADDRESS 2791 POINCIANA BLVD CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL TITLE SDCB TITLE ☐ Change ☐ Addition 🔀 Delete NAME NAME MEYERS, HILLEL A STREET ADDRESS STREET ADDRESS 4875 PINE TREE DRIVE CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL D CB ☐ Delete TITLE Change ★ Addition TITLE MEYERS HILLEL 4875 PINETREE OR NAME NAME STREET ADDRESS STREET ADDRESS 33140 CITY-ST-ZIP CITY-ST-ZIP MLAMI BEACH TITLE ☐ Delete TITLE ★ Addition LEYERS, JENNIFER L. 1875 PINETREE DR NAME NAME STREET ADDRESS STREET ADDRESS 33/40 CITY~ST-ZIP CITY-ST-ZIP MAMI BEACH TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.