FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K54678** (3)

1. Corporation Name
TICKETMASTER-FLORIDA MANAGEMENT CORPORATION

Principal Place of Business	Mailing Address
225 EAST ROBINSON ST STE 335 ORLANDO FL 32801 US	225 EAST ROBINSON ST STE 355 ORLANDO FL 32801 US

3. Date Incorporated or Qualified: 12/29/1988
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business	2a. Mailing Address
21	26 3701 Wilshire Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 7th Floor
City & State 23	City & State 28 Los Angeles, CA
Zip 24 Country 25	Zip 29 90010 Country 30 Los Angeles

4. FEI Number ~~52-1599754~~ 95-4370477 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
SUITE 420
FIRST FLORIDA BANK BLDG.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDC ☐ DELETE	1.1 TITLE ☐ Change ☐ Addition
NAME	ROSEN, FREDRIC D.	1.2 NAME
STREET ADDRESS	3701 WILSHIRE BLVD, STE 700	1.3 STREET ADDRESS
CITY-ST-ZIP	LOS ANGELES CA	1.4 CITY-ST-ZIP
TITLE	D ☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
NAME	LEONARD, ROBERT A.	2.2 NAME
STREET ADDRESS	591 CAMINO DE LA REINA, 310	2.3 STREET ADDRESS
CITY-ST-ZIP	SAN DIEGO CA	2.4 CITY-ST-ZIP
TITLE	VAS ☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
NAME	GOLDSTEIN, NED	3.2 NAME
STREET ADDRESS	3701 WILSHIRE BLVD, STE 700	3.3 STREET ADDRESS
CITY-ST-ZIP	LOS ANGELES CA	3.4 CITY-ST-ZIP
TITLE	T ☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
NAME	KNEPPER, PETER	4.2 NAME
STREET ADDRESS	3701 WILSHIRE BLVD, STE 700	4.3 STREET ADDRESS
CITY-ST-ZIP	LOS ANGELES CA	4.4 CITY-ST-ZIP
TITLE	EVP ☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
NAME	BENSION, MARC	5.2 NAME
STREET ADDRESS	3701 WILSHIRE BLVD, STE 700	5.3 STREET ADDRESS
CITY-ST-ZIP	LOS ANGELES CA	5.4 CITY-ST-ZIP
TITLE	S ☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
NAME	GANTZ, NORMAN J.	6.2 NAME
STREET ADDRESS	2 NORTH LASALE ST #2200	6.3 STREET ADDRESS
CITY-ST-ZIP	CHICAGO IL	6.4 CITY-ST-ZIP

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Peter Knepper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96 Date
213 381 2000 Daytime Phone #