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

FILED
Feb 06 1998 8:00am
Secretary of State

1. Corporation	ANO FAN CLUB, INC.	2 (1)				
Principal Place of Business Mailing Address						ter delben deden deber gelbes dedes ichte
1 PAMPANO SQUARE ATTN: TAX DEPARTMEN			THENT			
D32 7880 BENT BRANCH DR				100		
		IRVING TX 75063			DO NOT WRITE IN THIS SPACE	
U\$					3. Date Incorporated or Qualified	
					10/12/1989	
2. Principal I	Place of Business	2a. Mailing Addres			4. FEI Number	Applied For
21 26					04-3068565	Not Applicable
Suite, Apl	# etc	Suite, Apt. #, o			04 000000	\$8.75 Additional
22	, 5.0.	├ -¬			5. Certificate of Status Desired	Fee Required
City & Sta	ho	City & State	City & State			
	15	├ ¬ ′	├ ¬ ′		6. Election Campaign Financing	\$5.00 May Be
23	[28]			Trust Fund Contribution		
Zip	Country	Zip	Country		8. This corporation owes or has paid the	F
24	25 29		30]		Personal Property Tax due June 30.	
	9. Name and Address of Curr			E.T	10. Name and Address of New Regist	ered Agent
	IITED STATES CORPORATION	COMPANY		81 Name		
12	01 HAYES STREET #105		ŀ	82 Street	Address (P.O. Box Number is Not Acceptable)	
TA	LLAHASSEE FL 32301			Oli Oct	radicos (1.5. Dox Hamber is Not receptable)	
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,						
			į	64 City		85 Zip Code
44.5						FL 3 241 COOC
office or agent. I a SIGNATURE	am familiar with, and accopt the obl	igations of, Section 607.05	05, Florida State	utes.	d corporation submits this statement for the purp reporation's board of directors. I heroby accept th	no appointment as registered
	Signature, typod or punted name of registered r			Agent signatur		JFAC
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD DELETE		TE 3.1 1 1	ł F		Change Addition
NAME	PARKS, RALPH T.		1.2 NA	ME		
STREET ADDRESS 7880 BENT BRANCH DR #100			1.3 STREET ADDRESS			
CITY-ST-ZIP	IDUALIO TV			Y-S1-ZIP		İ
TITLE	T	DILE			70	Change Addition
NAME	GREER, HOMER L.	· · ·			DONALD V. ROACH	onango 🛅 nasmon
	BAAA DENT DESHALOLI DE MAAA		2.2 NA		DO MADIO 47 KONGH	ID #IAA
STREET ADDRESS			2351	HEET ADDRESS	THEO BENT BRANCH	, 186
CITY-ST-ZIP	IRVING TX			TY-ST-7IP	TRYING TX 75063 Asst. Secretary	
TITLE) b	☐ DELF	TE 3.1 THT	LĒ	ASST. SELRETARY	Change Addition
NAME	MAYER, MARK W		3.2 NA	ME	MARTINIA L CHATONS	.
STREET ADDRESS			3.3 \$16	REET ADDRESS	1800 BENT BRANCH F	7R. #100
CITY-ST-ZIP	IRVING TX		1	1Y-S1-7IP	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
TITLE	VPD	DELE			IRVING, TX 75063	Change Addition
NAME	ALBERT, CHARLES M	L. Ditt				E change E noutron
	TAGO DENT DEANOU DE MAGO		4. 2 NA		Ì	
STREET ADDRESS	IRVING TX		4.3 STF	REFT ADDRESS		
CITY-ST-ZIP	INVINU IA			Y-ST-ZIP		
TITLE		☐ DELE	JE 51 TH	L F		Change Addition
NAME			5.2 NAI	ME		
STREET ADDRESS			53 814	IEET ADDRESS	1	
	1					11/01
CITY-ST-ZIP		DELE		Y-S1-ZIP		Change Addition
TITLE		ווו ווינונ			400002424	Change Addition
NAME			6.2 NAI	ME	-02/09/9801003-	nno
STREET ADDRESS			6.3 STF	REET ADDRESS		11172
CITY-SI-ZIP	CITY-SI-7IP			Y - S1 - ZIP	###15U.UU	
	certify that the information supplied	with this bline does not on			L	or portify that the information

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos. 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.