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 #

(0)

GATOR ENTERTAINMENT, INC.

FILED

Feb 04 1998 8:00am

Secretary of State

CATON LITTERINALITY, 1110					1 18411811 818 11881 18188 11118 18181 1811	HAIR BIBNI BIBNI BIBNI BIBNI BIBNI IBDI
Principal Place of Business			Mailing Address		1 (09/(0)/ 310)/00/ 14/00 (11/0 /2/07 /0)/	iffit Athet aidet hinte nanel ninte enne
C/O ERIC A PETERSON			C/O ERIC A PETERSOI			
3020 N ROOSEVELT BLVD KEY WEST FL 33040			3020 N ROOSEVELT BI KEY WEST FL 33040	.VU	DO NOT WRITE IN T	THIS SPACE
RET TIEDI TE GOOTO			NET TEST TE SOON		3. Date Incorporated or Qualified	
					11/06/1989	
2. Principal	Place of Busin	ness	2a. Mailing Address	1.1	4, FEI Number	Applied For
21			26 5800 Overseas Hwy		65-0154457	Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.	•	5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State		- Flastin Complex Financian	
23			28 Maratha	n 7L	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country		Zip	Country	8. This corporation owes or has paid th	
24		25	29 33050	30 USA	Personal Property Tax due June 30.	Yes 🗌 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agen						ered Agent
PETERSON, ERIC A. 81 Name						
					ress (P.O. Box Number is Not Acceptable)	
	POMPANO E	BEACH 33060		83		
				03		
				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						
		or printed name of registered a		: Reg stered Agent signature requi	<u> </u>	AND DIDECTORS IN AS
12. TITLE	DP	UFFICERS A	ND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME		ISON, ERIC A.		1.2 NAME		
STREET ADDRESS		SE 5TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP		ANO BCH FL		1.4 City-ST-ZiP		
TITLE	DVP		☐ DELETE	2 1 TITLE		Change Addition
NAME	PETER	ISON, SHANE C		22 NAME		
STREET ADDRESS		n roosevelt blvi)	2.3 STREET ADDRESS		
CITY-ST-ZIP		VEST FL		2 4 CITY-ST-ZIP		
TITLE	DST		☐ DELETE	3 1 TITLE		Change Addition
NAME		ISON, MORIA		3.2 NAME		
STREET ADDRESS		SE 5TH AVE		3 3 STREET ADDRESS		
CITY-ST-ZIP	PUMP	ano BCH FL	☐ DELET É	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE				4.1 INCF 4. 2 NAME		ET Augusta
NAME STREET ADDRESS	ا			4.3 STREET ADDRESS		
CITY-ST-ZIP	۱ ا			4.4 CITY-ST-ZIP		1
TITLE			☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS	s			5.3 STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY - ST - ZIP		
TITLE			DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS	s		1	6.3 STREET ADDRESS		
CITY-ST-ZIP	Load A. Wt. C.	o information = 1 d	Applifications of an art are all the	6.4 CITY - ST - ZIP	Spotion 110 07/23/3 Elevido Statutos Libration	or certify that the information
14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplied that involved 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 of the locative or trustee empered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 6.7 or an attribution withlan address.						