

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006741

1. Entity Name

EXPRESS ENTERTAINMENT, INC.

**FILED**  
**May 16, 2000 8:00 am**  
**Secretary of State**

05-16-2000 90111 042 \*\*\*\*61.25

Principal Place of Business

Mailing Address

9955 61ST WAY NORTH  
PINELLAS PARK FL 33782

PO BOX 2126  
PINELLAS PARK FL 33780-2126

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3549047

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GREENE, JOHN B  
9955 61ST WAY NORTH  
PINELLAS PARK FL 33782

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME GREENE, JOHN B  
STREET ADDRESS 9955 61ST WAY NORTH  
CITY-ST-ZIP PINELLAS PARK FL 33782

TITLE D ☐ Change ☒ Addition  
NAME PAULETTA D FARNHAM  
STREET ADDRESS 1229 14th Circle SE  
CITY-ST-ZIP LARGO Florida 33771

TITLE D ☐ Delete  
NAME GREENE, KATHRYN  
STREET ADDRESS 9955 61ST WAY NORTH  
CITY-ST-ZIP PINELLAS PARK FL 33782

TITLE D ☐ Change ☒ Addition  
NAME Cheryl Seefong  
STREET ADDRESS 4528 19th Way North  
CITY-ST-ZIP St. Petersburg, FL 33709

TITLE D ☒ Delete  
NAME GREEN, JAMES LEWIS  
STREET ADDRESS 9955 61ST WAY NORTH  
CITY-ST-ZIP PINELLAS PARK FL 33782

TITLE D ☐ Change ☒ Addition  
NAME John Hively  
STREET ADDRESS 1399 S. Hercules Ave  
CITY-ST-ZIP Clearwater, Florida 33764

TITLE D ☐ Delete  
NAME ~~PAULETTA D FARNHAM~~  
STREET ADDRESS ~~1229 14th Circle SE~~  
CITY-ST-ZIP ~~LARGO, FL 33771~~

TITLE D ☐ Change ☒ Addition  
NAME JERRY GRIFFING  
STREET ADDRESS 111 1st Street North  
CITY-ST-ZIP Bellaire Beach, FL 34634

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KATHRYN GREENE 4/28/00 727-545-0684

CR2E037 (9/99)