

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

8/17

08-01-2003 90062 031 ***550.00

DOCUMENT # P02000113804

1. Entity Name

HARBORLIGHT ENTERTAINMENT, INC.



Principal Place of Business
**1000 UNIVERSAL STUDIOS PLAZA BLDG 22A
ORLANDO FL 32819**

Mailing Address
**1000 UNIVERSAL STUDIOS PLAZA BLDG 22A
ORLANDO FL 32819**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FBI Number

04-3716760

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCLEOD, W. EDWARD
W. EDWARD MCLEOD, P.A.
284 PARK AVE NO
WINTER PARK FL 32789**

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete
D PERROTT, ANDY
STREET ADDRESS
1000 UNIVERSAL STUDIOS PLAZA BLDG 22A
CITY-ST-ZIP
ORLANDO FL 32819

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE NAME ☐ Change ☐ Addition
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)(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/03 407-224-6540

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

55054912
#PO 2000113804

HARBORLIGHT ENTERTAINMENT, INC.

1000 UNIVERSAL STUDIOS PLAZA, BUILDING 22-A,

ORLANDO, FLORIDA 32819

OFFICE: (407)224-654 FAX: (407)224-6539

August 21, 2003

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Division of Corporations:

Per your request, enclosed is HarborLight Entertainment's uniform business report copy with block 4 completed. For your convenience, we have also enclosed a copy of your letter to us regarding this matter.

Thank you,

Richard J. Spiller

Richard J. Spiller
Controller