

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

FILED
Apr 23 1996 8:00 am
Secretary of State

DOCUMENT # P32291 (7)

1. Corporation Name

RAYCOM SPORTS & ENTERTAINMENT, INC.

Principal Place of Business

P.O. BOX 33367
CHARLOTTE NC 28233

Mailing Address

P.O. BOX 33367
CHARLOTTE NC 28233

3. Date Incorporated or Qualified
12/27/1990

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

56-1244569

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C ☐ DELETE
NAME U. BERTRAM ELLIS JR.
STREET ADDRESS ONE BUCKHEAD PLAZA, STE 930, 360PEACHTREE
CITY-ST-ZIP ATLANTA GA

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME HAINES, KEN
STREET ADDRESS 412 EAST BLVD.
CITY-ST-ZIP CHARLOTTE NC 28203

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE S ☐ DELETE
NAME JAMES S. ALTENBACH
STREET ADDRESS ONE BUCKHEAD PLAZA, STE 930, 3060 PEACHTREE
CITY-ST-ZIP ATLANTA GA

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PM ☒ DELETE
NAME RAY, WILLIAM E.
STREET ADDRESS 412 EAST BLVD.
CITY-ST-ZIP CHARLOTTE NC

4.1 TITLE V ☐ Change ☒ Addition
4.2 NAME Rick Fujita
4.3 STREET ADDRESS 412 East Blvd.
4.4 CITY-ST-ZIP Charlotte, NC 28203

TITLE TS ☐ DELETE
NAME JAMES V. SANDRY
STREET ADDRESS ONE BUCKHEAD PLAZA, STE 930, 3030PEACHTREE
CITY-ST-ZIP ATLANTA GA

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME RAYMOND R. WARREN
STREET ADDRESS 500 FIFTH AVE., SUITE 2330
CITY-ST-ZIP NEW YORK NY

6.1 TITLE PM ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Rick Fujita
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rick Fujita

4/17/96

Date

(704)378-4440

Daytime Phone #

CR2E034 (12/95)