

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P92000005722 (3)**

1. Corporation Name

ENTERTAINMENT CONCEPTS, INC.

Principal Place of Business

**3044 SHEPARD OF THE HILLS EXPWY
SUITE 307
BRANSON MO 65616
US**

Mailing Address

**3044 SHEPARD OF THE HILLS EXPWY
SUITE 307
BRANSON MO 65616
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1992

4. FEI Number

59-3153026

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**LOONEY, STEPHEN R
200 SOUTH ORANGE AVENUE
SUN BANK CENTER SUITE 3000
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

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

OFFICERS AND DIRECTORS

12. ☐ DELETE

TITLE **DP**
NAME **JOHNSON, KAREL G**
STREET ADDRESS **39 AVISTA CIR**
CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE **V** ☐ DELETE
NAME **ACHTERBERG, CHARLES R**
STREET ADDRESS **3044 SHEPHERD OF THE HILLS EXPWY, #307**
CITY-ST-ZIP **BRANSON MO**

TITLE **DS** ☒ DELETE
NAME **SMITH, JEREMY**
STREET ADDRESS **391 SCOTTSDALE DRIVE**
CITY-ST-ZIP **GUELPH ON**

TITLE **DT** ☐ DELETE
NAME **GRAY, DAVID**
STREET ADDRESS **3545 OCEAN DRIVE**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **AS** ☐ DELETE
NAME **STEWART, PEGGY**
STREET ADDRESS **3044 SHEPARD OF THE HILLS STE 307**
CITY-ST-ZIP **BRANSON MO**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13. ☒ Change ☐ Addition

1.1 TITLE **DP**
1.2 NAME **Johnson, Karel G.**
1.3 STREET ADDRESS **1495 Lands End Road**
1.4 CITY-ST-ZIP **Manalapan, FL 33462**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS

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

3.4 CITY-ST-ZIP ☒ Change ☐ Addition
4.1 TITLE **DTS**
4.2 NAME **Gray, David**
4.3 STREET ADDRESS **3545 Ocean Drive**
4.4 CITY-ST-ZIP **Vero Beach, FL 32963**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS

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

14. 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 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:

(417)339-4405

CR2E034 (10/97)