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Mar 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000054895 (6)

1. Corporation Name
BLOCKBUSTER PARK LANDS, INC.



Principal Place of Business

C/O LEGAL DEPT
200 S ANDREWS AVE
FT LAUDERDALE FL 33301
US

Mailing Address

C/O LEGAL DEPT
200 S ANDREWS AVE
FT LAUDERDALE FL 33301-1864
US

3. Date Incorporated or Qualified
08/05/1993

3a. Date of Last Report
04/30/1996

4. FEI Number
65-0431901

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 1201 Elm Street

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Dallas, TX

City & State

28

Zip

24 75270

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	FIELDS, BILL	
STREET ADDRESS	200 S ANDREWS AVE	
CITY - ST - ZIP	FT LAUDERDALE FL 33301	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BYRNE, THOMAS C	
STREET ADDRESS	200 S ANDREWS AVE	
CITY - ST - ZIP	FT LAUDERDALE FL 33301	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	HAWKINS, THOMAS W	
STREET ADDRESS	200 S ANDREWS AVE	
CITY - ST - ZIP	FT LAUDERDALE FL 33301	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	FLEETWOOD, ROBERT	
STREET ADDRESS	200 S ANDREWS AVE	
CITY - ST - ZIP	FT LAUDERDALE FL 33301	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	DIAMBROSIO, THOMAS	
STREET ADDRESS	200 S ANDREWS AVE	
CITY - ST - ZIP	FT LAUDERDALE FL 33301	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	HALACY, MARK	
STREET ADDRESS	200 S ANDREWS AVE	
CITY - ST - ZIP	FT LAUDERDALE FL 33301	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	1201 Elm Street
14 CITY - ST - ZIP	Dallas, TX 75270
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Vice Chairman
23 STREET ADDRESS	1201 Elm Street
24 CITY - ST - ZIP	Dallas, TX 75270
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Executive V.P.
33 STREET ADDRESS	Gary Petersen
34 CITY - ST - ZIP	1201 Elm Street
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Ex. V.P.
43 STREET ADDRESS	Adam Phillips
44 CITY - ST - ZIP	1201 Elm Street
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	Mark Gilman
53 STREET ADDRESS	201 Elm St.
54 CITY - ST - ZIP	Dallas, TX 75270
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do 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: *Marki Sh...* Asst. Sec.

3/4/97 954-832-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)