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FILED

Jan 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000068866 (1)

1. Corporation Name

UNITED GAME SOURCE, INC.



Principal Place of Business

210 RING AVE NE
UNIT 103/104
PALM BAY FL 32907
US

Mailing Address

481 RED SAIL WAY
SATELLITE BEACH FL 32937
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/27/1993

4. FEI Number

59-3204315

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

21 232 E. EAU GALLIE BLVD

2a. Mailing Address

26 232 E. EAU GALLIE BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 INDIAN HARBOUR BEACH

City & State

28 INDIAN HARBOUR BEACH

Zip

Country

24 32937

25 USA

Zip

Country

29 32937

30 USA

9. Name and Address of Current Registered Agent

MARY ELLEN T. LONG
510 PARKSIDE PLACE
UNIT 9
INDIAN HARBOUR BCH FL 32937

10. Name and Address of New Registered Agent

81 Name

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

469 SHERIDAN AVE

83

84 City

SATELLITE BEACH

FL

85 Zip Code

32937

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

T ☐ DELETE

NAME
PETERSON, JAMES J
STREET ADDRESS
1348 HILIAS ST NW
CITY-ST-ZIP
PALM BAY FL

PD ☐ DELETE

NAME
LONG, MARY E
STREET ADDRESS
510 PARKSIDE PLACE
CITY-ST-ZIP
INDIAN HARBOUR BCH FL

VD ☐ DELETE

NAME
LONG, JORY L.
STREET ADDRESS
510 PARKSIDE PLACE
CITY-ST-ZIP
INDIAN HARBOUR BCH FL

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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: MARY ELLEN T. LONG 1-9-97 407-779-1100

CR2E034 (10/97)