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

DOCUMENT # **P94000028697 (8)**

1. Corporation Name
COLLINS GAMES OF FLORIDA, INC.

Principal Place of Business
1341 RUTHERFORD ROAD
GREENVILLE SC 29609

Mailing Address
1341 RUTHERFORD ROAD
GREENVILLE SC 29609

3. Date Incorporated or Qualified: 04/14/1994
3a. Date of Last Report: 03/22/1995

2. Principal Place of Business
21
Street, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Street, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 57-0998113 — 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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name: Tommy L. Queen
82 Street Address (P.O. Box Number is Not Acceptable): 1024 Edison Ave.
83
84 City: Jacksonville FL 85 Zip Code: 32204

11. Pursuant to the provisions of Sections 607.0505 and 607.1506, 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: Tommy L. Queen — 1-26-96
Signature of Registered Agent — Date

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	COLLINS, FRED	
STREET ADDRESS	1341 RUTHERFORD ROAD	
CITY-ST-ZIP	GREENVILLE SC	
TITLE	TS	☐ DELETE
NAME	SAAD, JERRY T	
STREET ADDRESS	1341 RUTHERFORD ROAD	
CITY-ST-ZIP	GREENVILLE SC	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	D	☐ 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 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)(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 a title.

SIGNATURE: CFO — 1-26-96 — 864-268-1114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Jerry T. Saad

CR2E034 (12/95)