

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90209 010 ***150.00

DOCUMENT # P94000054896

1. Entity Name

ARENA MANAGEMENT GROUP, INC.



Principal Place of Business

**3485 W. VINE STREET
KISSIMMEE FL 34741**

Mailing Address

**3485 W. VINE STREET
KISSIMMEE FL 34741**

2. Principal Place of Business

101 Park Place Blvd.

Suite, Apt. #, etc.

Suite 2

3. Mailing Address

101 Park Place Blvd.

Suite, Apt. #, etc.

Suite 2

City & State

Kissimmee FL

City & State

Kissimmee FL

Zip

34741

Country

USA

Zip

34741

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3269832

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUDLAM, LESLIE

3485 W. VINE STREET

KISSIMMEE FL 34741

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PD
LUDLAM, LESLIE
3485 W. VINE STREET
KISSIMMEE FL 34741**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VP
ARENA, WALTER
3485 W. VINE STREET
KISSIMMEE FL 34741**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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**STD
LUDLAM, LESLIE
3485 W. VINE STREET
KISSIMMEE FL 34741**

☐ Delete

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☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/03
Date

Daytime Phone #

CR2E034 (10/02)