2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000017614

Entity Name: GAMING ENTERPRISES, INC.

FILED Apr 03, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5643 MONTE ROSSWO RD 5643 MONTE ROSSO RD SARASOTA, FL 34243 SARASOTA, FL 34243 **Current Mailing Address: New Mailing Address:** 5643 MONTE ROSSO RD 5643 MONTE ROSSWO RD SARASOTA, FL 34243 SARASOTA, FL 34243 FEI Number: 65-0571031 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NODHOLM, DONALD M 5643 MONTE ROSSO RD SARASOTA, FL 34243 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. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition REESE, HOLLY L Name: Name: REESE, HOLLY L 4450 MCINTOSH PARK DR. APT 1201 1932 WOOD HOLLOW LN Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34235 DP Title: (X) Change () Addition Title: () Delete Name: NODHOLM, DONALD M Name: NODHOLM, DONALD M 4931 SILKWOOD DRIVE 5643 MONTE ROSSO RD Address: Address: SARASOTA, FL 34241 City-St-Zip: City-St-Zip: SARASOTA, FL 34243 Title: TD () Delete Title: () Change () Addition TAYLOR, WAYNE Name: Name: 507 CO RD 41 Address: Address: City-St-Zip: VELARDE, NM 87582 City-St-Zip: Title: **VPD** () Delete Title: VPD (X) Change () Addition HANSEN, E. PAUL HANSEN, E. PAUL Name: Name: Address: 3102 JESSIE HARBOR DR Address: 8866 ESTEPONIA CT City-St-Zip: OSPREY, FL 34229 City-St-Zip: SARASOTA, FL 34238

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD M NODHOLM PD 04/03/2002