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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P95000079586 (0)** N/C 3/17/97

1. Corporation Name
~~TALKING TRASH, INC.~~ IDEA Fun Co.

[redacted]

Principal Place of Business	Mailing Address
215 E. CENTRAL BLVD. ORLANDO FL 32801	215 E. CENTRAL BLVD. ORLANDO FL 32801-1918

3. Date Incorporated or Qualified: 10/13/1995	3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-3362204	☐ 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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

DARLEY, HUGH E JR
901 E WASHINGTON ST
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name: John Campbell
82 Street Address (P.O. Box Number is Not Acceptable): 110 UNIVERSITY PARK DRIVE, SUITE 115
83
84 City: WINTER PARK, FL 85 Zip Code: 32792

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: John M Campbell — MARCH 31, 1997
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GIBSON, GREG		1.2 NAME		
STREET ADDRESS	901 E WASHINGTO ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801		1.4 CITY-ST-ZIP		
TITLE	VD	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DARLEY, HUGH		2.2 NAME		
STREET ADDRESS	215 E. CENTRAL BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801		2.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MILLICAN, ART		3.2 NAME		
STREET ADDRESS	215 E. CENTRAL BLVD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801		3.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	4.1 TITLE	PD, SD, TD	☒ Change ☐ Addition
NAME	HOBBS, JULIA		4.2 NAME		
STREET ADDRESS	215 E. CENTRAL BLVD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32801		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	800002138598 -04/10/97--01004--003 ***165.00	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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: [illegible] — 3.30.97 — 407-841-2010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

4/9/97

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