

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # <u>P9600006259</u> 1. Corporation Name <u>TENNIS EVENTS, INC.</u>
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Principal Place of Business <u>c/o SFX Entertainment, Inc.</u> <u>650 Madison Avenue</u> <u>New York, NY 10022</u>	Mailing Address <u>c/o SFX Entertainment, Inc.</u> <u>650 Madison Avenue</u> <u>New York, NY 10022</u>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified <u>1/17/1990</u>	4. FEI Number <u>05-0640993</u> Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	6. Election Campaign Financing <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	7. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent <u>Corporation Service Company</u> <u>1201 Hays Street</u> <u>Tallahassee, FL 32301</u>	10. Name and Address of New Registered Agent 81 Name <u>Corporation Service Company</u> 82 Street Address (P.O. Box Number is Not Acceptable) <u>1201 Hays Street</u> 83 84 City <u>Tallahassee</u> FL 85 Zip Code <u>32301</u>
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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 <u>Deborah D. Skipper</u> <u>Deborah D. Skipper</u> <u>8-19-99</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent must be a resident of Florida and must be at least 18 years of age at the time of filing.)</small> DATE
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12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.
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SIGNATURE: <u>Richard A. Hesse</u> Assistant Secretary <u>8/16/99</u> (212) 838-3100 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
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CR2E034 (11/98)

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**TENNIS EVENTS, INC.  
OFFICERS AND DIRECTORS**

<b>OFFICERS</b>	<b>TITLE</b>	<b>ADDRESS</b>
Thomas P. Benson	CFO and Treasurer	SFX Entertainment, Inc. 650 Madison Avenue New York, NY 10022
John Coughlan	Vice President	SFX Entertainment, Inc. 150 East 58 <sup>th</sup> Street New York, NY 10155
Michael G. Ferrel	President and CEO and Director	SFX Entertainment, Inc. 650 Madison Avenue New York, NY 10022
Richard A. Liese	Vice President and Assistant Secretary	SFX Entertainment, Inc. 650 Madison Avenue New York, NY 10022
Robert F. X. Sillerman	Executive Chairman and Director	SFX Entertainment, Inc. 650 Madison Avenue New York, NY 10022
Howard J. Tytel	EVP and Secretary and Director	SFX Entertainment, Inc. 650 Madison Avenue New York, NY 10022



ACCOUNT NO. : 072100000032

REFERENCE : 346587 4375356

AUTHORIZATION : *Patricia Pijute*

COST LIMIT : \$ 558.75

ORDER DATE : August 18, 1999

ORDER TIME : 10:35 AM

ORDER NO. : 346587-025

CUSTOMER NO: 4375356

CUSTOMER: Ms. May Hung Lee  
Sfx Entertainment, Inc.  
650 Madison Avenue  
16th Floor  
New York, NY 10022

ANNUAL REPORT FILING

NAME: TENNIS EVENTS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
XX        CERTIFICATE OF GOOD STANDING

CONTACT PERSON: *Michelle Disbrow*

*Christine*

EXAMINER'S INITIALS:

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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