

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

FILED  
Feb 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000021835 (9)  
1. Corporation Name  
CODY AMUSEMENTS, INC.

Principal Place of Business 7282 55TH AVE., E., STE. 126 BRADENTON FL 34203	Mailing Address 7282 55TH AVE., E., STE. 126 BRADENTON FL 34203
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 401 Mill Run East Suite, Apt. #, etc. 22 — City & State 23 Bradenton, FL Zip 24 34202		2a. Mailing Address 26 401 Mill Run East Suite, Apt. #, etc. 27 — City & State 28 Bradenton, FL Zip 29 34202		3. Date Incorporated or Qualified 03/07/1996	
Country 25 Manatee		Country 30 Manatee		4. FEI Number 65-0650858	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SCHOFIELD, P. ALLEN 1429 60TH AVE. W. BRADENTON FL 34207		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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

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	D	1.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	SMITH, DEAN M	1.2 NAME	Smith Dean M.
STREET ADDRESS	7282 55TH AVE., E., STE. 126	1.3 STREET ADDRESS	401 Mill Run E.
CITY-ST-ZIP	BRADENTON FL 34203	1.4 CITY-ST-ZIP	Bradenton, FL. 34202
TITLE	D	2.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	SMITH, MARCILE L	2.2 NAME	Smith Marcile L
STREET ADDRESS	7282 55TH AVE., E., STE. 126	2.3 STREET ADDRESS	401 Mill Run E.
CITY-ST-ZIP	BRADENTON FL 34203	2.4 CITY-ST-ZIP	Bradenton, FL. 34202
TITLE		3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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.

SIGNATURE: *Debra L. Smith* MARCILE L. SMITH 1/20/98 911-745-5769

CP2E034 (10/97)