

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000036040 (9)

1. Corporation Name

FRONTRUNNER PRODUCTIONS, INC.

Principal Place of Business

DISNEY/MGM STUDIOS, BUNGALOW 4
P.O. BOX 22808
ORLANDO FL 32830

Mailing Address

DISNEY/MGM STUDIOS, BUNGALOW 4
P.O. BOX 22808
ORLANDO FL 32830-2808

2. Principal Place of Business

21 6197 Westgate Dr.
22 Suite, Apt. #, etc. #106

City & State

23 Orlando FL

Zip

24 32835

Country

25 Orange

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

City & State

28 Orlando FL

Zip

29 32835

Country

30 Orange

9. Name and Address of Current Registered Agent

WHITAGRE, WILLIAM L
DISNEY/MGM STUDIOS, BUNGALOW 4
ORLANDO FL 32830

3. Date Incorporated or Qualified

04/22/1996

3a. Date of Last Report

4. FEI Number

59-3421226

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

10. Name and Address of New Registered Agent

81 Name W. Edward McLeod, W. Edward McLeod, P.A.
82 Street Address (P.O. Box Number is Not Acceptable) 201 So. Orange Ave., Ste. 1010
83
84 City Orlando FL 85 Zip Code 32801

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

W. Edward McLeod, Reg. Agent

6/10/97

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE

NAME WILSON, BRENTON L
STREET ADDRESS 6197 WESTGATE #106
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ DELETE

NAME PREVESK, STEVEN R
STREET ADDRESS 6197 WESTGATE #106
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ DELETE

NAME EBERTS, THOMAS
STREET ADDRESS 6197 WESTGATE #106
CITY-ST-ZIP ORLANDO FL 32835

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

800002209948-7

-06/12/97-01020-001

****252.50 ****165.00

DVP

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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

CR2E034 (9/96)