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

FILED
May 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **P96000073306 (8)**

1. Corporation Name
ACADEMY ENTERTAINMENT GROUP, INC

Principal Place of Business	Mailing Address
~~6002 JENNINGS DRIVE~~ ~~ORLANDO FL 32808~~ 803 PAHOA ST. ORLANDO, FL. 32818	~~PO BOX 532011~~ ~~ORLANDO FL 32853~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/29/1996

2. Principal Place of Business	2a. Mailing Address
21 P.O. BOX 22728	26 P.O. Box 22728
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 LAKE BUENA VISTA, FL.	28 Lake Buena Vista, FL.
24 Zip 32830 25 Country ORANGE	29 Zip 32830 30 Country Orange

4. FEI Number: 59-3395858 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ANGLIN, FRANKLIN C 7558 SUNTREE CIRCLE, APT 67 ORLANDO FL 32807	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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 Franklin Craig Anglin — Franklin Craig Anglin — 5/16/98
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	P	☐ DELETE	1.1 TITLE	P	☐ Change ☐ Addition
NAME	ANGLIN, FRANKLIN C		1.2 NAME	FRANKLIN C. ANGLIN	
STREET ADDRESS	7558 SUNTREE CIRCLE APT 67		1.3 STREET ADDRESS	7558 SUNTREE CIRCLE APT. 67	
CITY-ST-ZIP	ORLANDO FL 32807		1.4 CITY-ST-ZIP	ORLANDO, FL. 32807	
TITLE	VPS	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ANDERSON, JOHN		2.2 NAME	DELETE	
STREET ADDRESS	8049 ANTIBES CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32825		2.4 CITY-ST-ZIP		
TITLE	VPE	☐ DELETE	3.1 TITLE	VPE	☐ Change ☐ Addition
NAME	LORD, SHANE		3.2 NAME	SHANE LORD	
STREET ADDRESS	2535 S. SEMARON BLVD. APT 1626		3.3 STREET ADDRESS	2535 S. SEMORAN BLVD. APT. 1626	
CITY-ST-ZIP	ORLANDO FL 32822		3.4 CITY-ST-ZIP	ORLANDO, FL. 32822	
TITLE	VPS	☐ DELETE	4.1 TITLE	VPS	☒ Change ☐ Addition
NAME	VAN HOUTTE, DAVID		4.2 NAME	VAN HOUTTE, DAVID	
STREET ADDRESS	6002 JENNINGS DR CHANGE ADDRESS →		4.3 STREET ADDRESS	P.O. BOX 617217 ← 617217 NA	
CITY-ST-ZIP	ORLANDO FL 32808		4.4 CITY-ST-ZIP	ORLANDO, FL. 32861	
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		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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: Franklin Craig Anglin — President — 5/16/98 — (407) 560-8885