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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT # | P96000088363 |
|------------------|--------------|
| 4 Companion Name | 1 000000000 |

| | 1999 | Mar. | | | | CO top on the mate |
|---|---|--------------------|--------------------------------------|--------------------------|---|--|
| DOCUMENT # P9600088363 LEADER SPORTS MANAGEMENT, INC. | | | | | 90.178.29 [11.5:46 TAU / Bost of Billion | |
| | or orrio www.v.oewe. | | | | | |
| Principal Place | of Business | Mailing A | ddress | | | 1 48 1/48 1 1/4 18 1/4 18 11/1 8 11 |
| 390 N ORANGE | AVENUE | 390 N OR | ANGE AVENUE | | | |
| SUITE 2600 | | SUITE 260 | _ | | | DO NOT WRITE IN THIS SPACE |
| ORLANDO FL 3 | 2801-1642 | OHLANDU | FL 32801-1642 | | | 3. Date Incorporated or Qualifed |
| | | | | | | 10/25/1996 |
| 2. Principal P | lace of Business | 2a. Mailur | ig Address | | | 4. FEI Number Applied For |
| 21 | | 26 | | | | 59-344 1682 Not Applicable |
| Suite, Apt. | #, etc. | Suite | Apt.#, etc. | | | 5. Certificate of Status Desired [] \$8.75 Additional |
| 22 | | 27 | ., | | | Fee Required |
| City & Stat | e | City & | \$ State | | | Flection Campaign Financing \$5.00 May Be |
| 23 | · · · · · · · · · · · · · · · · · · · | 28 | | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | ī | Country | | 8. This corporation owes the current year Intangible Personal Property Tax |
| 24] | 9. Name and Address of Curre | 29 | | 30 | | Personal Property Tax. ✓ Yes LINo 10. Name and Address of New Registered Agent |
| | s. Name and Address of Corre | nt Kegistereo | ngen | 81 | Name | 10. Hante and Madicas of Hear Hogisterion Madic |
| NEA | l, richard e | | | | | |
| | n orange avenue | | | 82 | Street Ad | ddress (P.O. Box Number is Not Acceptable) |
| | E 2600 | | | 83 | | |
| ORL | ANDO FL 32801-1642 | | | 84 | | 85 Z _{ID} Code |
| | | | | 04 | City | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.150 | 8, Florida Statute | s the above | named co | orporation submits this statement for the purpose of changing its registered alion's board of directors. Thereby accept the appointment as registered. |
| oπice or n agent. I a | egistered agent, or both, in the State m familiar with, and accept the oblig | ations of, Section | n change was au n 607.0505, Flori | monzeo by da Statutes | тне согрога | ation's board of directors. Thereby accept the appointment as registered |
| SIGNATURE | | | | | | |
| | Signature, typed or printed name of registered ag | | | | l s ignature requ | inreid when reinstating) DATE |
| 12. | OFFICERS A | ND DIRECTOR | S [] DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | FRALEY, ROBERT E | | Fiberrie | 1 2 NAME | | |
| NAME STREET ADDRESS | 390 N ORANGE AVENUE STE | 2600 | | 13 STREET | *DDDE ČČ | 0000028699601 |
| | ORLANDO FL | . 2000 | | 14 CITY-S1 | | -05/10/3901133011 |
| CITY-ST-ZIP TITLE | V | | DELETE | 2 1 TITLE | 1-211 | ****150.00 ****150.00 |
| NAME | ARDAN, IVAN N | | | 22 NAME | | |
| STREET ADDRESS | 390 N. ORANGE AVE., STE. 2 | 2600 | | 23 STREET | ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | | | 2 4 CITY-S | | |
| TITLE | VST | | DELETE | 3 1 TITLE | | [] Change [] Addition |
| NAME | NEAL, RICHARD E | | | 32 NAME | | |
| STREET ADDRESS | 390 N ORANGE AVE, STE 26 | 00 | | 33 STREET | ADDRESS | İ |
| CITY-ST-ZIP | ORLANDO FL 32801 | | | 34 CITY-S | T-ZIP | |
| TITLE | | | [] DELETE | 4.1 TITLE | | [] Change [] Addition |
| NAME | | | | 4. 2 NAME | | |
| STREET ADDRESS | | | | 43 STREET | | |
| CITY-ST-ZIP | | | Doctore | 4.4 C/TY-S1 | [- 2 IP | [] Change [] Addition |
| TITLE | | | □ DELETE | 5 1 TITLE 5 2 NAME | | [] Change [] Addition |
| NAME ADDEED ADDRESS | | | | 53 STREET | ADDRESS | 1 |
| STREET ADORESS | | | | 54 CITY-ST | | |
| CITY-ST-ZIP | | | [] DELETE | 61 TITLE | | Change [] Addition |
| NAME | | | | 6.2 NAME | | |
| STREET ADDRESS | | | | 63 STREET | ADDRESS | B. S/4/99 99M |
| CITY-ST-ZIP | | | | 6 4 CITY-SI | r-zi₽ | 15. >11 147 4714 |

14. 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 suppliemental 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.

RICHARD E NEAL / VST 4-23-99 407-425-4900