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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 09 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000095908 (5)

GULF STATES SPORTS & ENTERTAINMENT PROMOTIONS, I

Principal Place of Business 124 W ROMANA ST PENSACOLA FL 32501		Mailing Address 124 W ROMANA ST PENSACOLA FL 32501-5821			I (OOMEN NO COME DINE DOWN BRIEF BRIN DERIG TO HE BRIEF CHAR BOLEF HOW LAND		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For		
21		26			72 - 34(\$41 Not Applicable		
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.			5. Certificate of Status Desired		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Coun	try	8. This corporation has liability for In		
24	25	29	30			Yes D-No	0. 100.002,
·····	g. Name and Address of Curre	ent Registered Agent			10, Name and Address of New Reg	Istered Agent	
.iON	ES, STRYKER M		1	Name			
	W ROMANA ST		├ .	2 Charles	deed (D.O. Double-bedie Med Assessable		
	SACOLA FL 32501	82 Street		Street Ac	ddress (P.O. Box Number is Not Acceptable)		
1 441	0,10001112 02001		ļī	33			
			1	34 City		85 Zip	Code
Office or t	to the previsions of Sections 607,05 registered agent, or both, in the Statum familiar with, and accept the obli	te of Florida. Such change was	authorized	by the corpor	orporation submits this statement for the pration's board of directors. I hereby accept	urpose of changing tithe appointment a	its registered s registered
SIGNATURE	Signature, typed or printed name of registered a	oent and tille it applicable (NO	IE: Realstered	Agent signature rec	gulfed when reinstating)	DATE	
12.		D DIRECTORS 13			ADDITIONS/CHANGES TO OFFIC		AS IN 12
TITLE	D	DELETE	1.1 (1)	E	7.00110110101111020 70 07110	Change	Addition
NAME	BARTLETT, RONALD E		1.2 NA	AE]			
STREET ADDRESS	1309 PASCAGOULA ST			EET ADDRESS			
CITY- ST-ZIP	PASCAGOULA MS 39567			r-ST-ZIP			
TITLE		☐ DELETE	2.1 TITE			☐ Change	☐ Addition
NAM{			2.2 NAN	AF .			_
STREET ADDRESS			B	EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
me		DELETE	3.1 T(T)			Change	Addition
NAME		-	3.2 NA		·	Land Orland	
STREET ADDRESS				EET ADDRESS			
CHY-ST-ZIP				Y-ST-ZIP			
THILE		DELETE	4.1 TITE			☐ Change	Addition
NAME			4. 2 NA				1.00.11011
STREET ADORESS				1			
				EET ADDRESS			
CHIYASTAZIP TITLE		DELETE	4.4 CIT	r-ST-ZIP		Change	Addition
		Lad peculi				F"1 CIRUTE	TI VOUIION
NAME CTOLLT ADDRESS			5.2 NAM	1			
STREET ADORESS				EET ADDRESS			
CHY-SI-ZIP		Druttr		(-ST-ZIP			1 4 2 2 2
TITLE		☐ DELETE	6.1 7171	1		Change	Addition
NAME.			6.2 NA				
STREET ADDRESS			6.3 STR	EET ADDRESS			
0.015 03 200	l .						

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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changet. In on an attachment with an address.