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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

Change

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000011130 (6)

REAL TIME GAMES, INC.

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

853 VANDERBILT BEACH ROAD 853 VANDERBILT BEACH ROAD SUITE 331 SUITE 331 DO NOT WRITE IN THIS SPACE NAPLES FL 34108 NAPLES FL 34108 3. Date Incorporated or Qualified 02/04/1997 4. FEI Numbe 2a. Mailing Address 2. Principal Place of Business Applied For Not Applicable 21 26 \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Ζφ Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name SCHECHTER, JOEL H **CUMMINGS & LOCKWOOD** Street Address (P.O. Box Number is Not Acceptable) 3001 TAMIAMI TRAIL NORTH Ŕŝ NAPLES FL 34103 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 Signature, typed or prested name of regestered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME TODD, NANCY L 1.2 NAME 5 BLUEBILL AVENUE, STE #107 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34108 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE WORLEY, CLIFFORD O NAME 2.2 NAME STREET ADDRESS 5 BLUEBILL AVENUE, STE #107 2.3 STREET ADDRESS NAPLES FL 34108 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-\$1-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 Coporation 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE