

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 17, 2001 8:00 am**
Secretary of State

05-17-2001 91328 023 ***150.00

C0067378

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000027377			
1. Entity Name West Palm Entertainment, Inc.			
Principal Place of Business 401 E. Semoran Blvd. Casselberry, FL 32707		Mailing Address 401 E. Semoran Blvd. Casselberry, FL 32707	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3448611		Applied For ☐ \$8.75 Additional Fee Required	
5. Certificate of Status Desired ☐			
6. Name and Address of Current Registered Agent Don L. Brown, Esq. 200 N. Thornton Ave. Orlando, FL 32801			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐			
FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001: Fee will be \$550.00 Make Check Payable to Department of State			
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Veigle, James 401 E. Semoran Blvd. Casselberry, FL 32707 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Veigle, Charles 401 E. Semoran Blvd. Casselberry, FL 32707 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nancy Voegtlin 401 E. Semoran Blvd. Casselberry, FL 32707 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nancy Voegtlin 401 E. Semoran Blvd. Casselberry, FL 32707 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  4-27-01 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E034 (11/00)