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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700038726 (0)

## **EMERALD ENTERTAINMENT COMPANY**

## FILED Jan 16 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address   |  |  |                              |   |
|---|--|--|------------------------------|---|
| 1 '   |  | Mailing Address                        |                              |   |
| 2100 EMERALD DUNES DRIVE 2100 EMERALD DUNES WEST PALM BEACH FL 33411 WEST PALM REACH FL   |  |  |                              |   |
| 17EQT TREM  | DEROIT TE 35411                                | WEST PALM BEACH FL                     | 33411                        | DO NOT WRITE IN THIS SPACE  |
| ŀ   |  |  |                              | 3. Date Incorporated or Qualified   |
|   |  |  |                              | 04/30/1997  |
| <u> </u>  | Place of Business                              | 2a. Mailing Address                    |                              | 4 FFI Number  |
| 21  |  | 26                                     |                              | 105-0749763   Not Applicable  |
| Suite, Apt  | #, etc.  | Suite, Apt. #, etc.                    |                              | 5 Certificate of Status Desired \$8.75 Additional   |
| City & State  |  |  |                              | Fee Required  |
| 23  | 10   | City & State                           |                              | 6. Election Campaign Financing \$5.00 May Be  |
| Z <sub>i</sub> p  | Country  | <b>28</b> ]<br>Zip                     | Country                      | Trust Fund Contribution   |
| 24  | 25   | 29                                     | 30                           | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. |
| E4  | 9. Name and Address of Cur                     |  | 130                          | Personal Property Tax due June 30. Wes No  10. Name and Address of New Registered Agent             |
| Ct  | IERRY, RICHARD G                               |  | 81 Name                      | 10, Walle and Addition of Not Hogistolea Agent  |
| 1665 PALM BEACH LAKES BLVD. SUITE 600   |  |  |                              |   |
| WEST PALM BEACH FL  |  |  | 82 Street                    | Address (P.O. Box Number is Not Acceptable)   |
|   |  |  | 83                           |   |
|   |  |  | ļ                            |   |
|   |  |  | 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. Hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutos. |  |  |                              |   |
| _   | im tamiliar with, and accept the or            | iligations of, Section 607.0505, Fig   | orida Statutes.              |   |
| SIGNATURE   | Signature, typod or printed name of registered | age of and to if applicable (NOI       | E Registered Agent s-gnature | (required when renstating) DATE   |
| 12.   |  | AND DIRECTORS                          | 13.                          | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |
| TITLE   |  | ☐ DELETE                               | 1.1 TOLE                     | S & T Change Addition   |
| NAME  |  |  | 1.2 NAME                     | FINCH RAYMON P TIT  |
| STREET ADDRESS  |  |  | 1.3 STREET ADDRESS           | FINCH, KAYMON R. TIT<br>2100 EMERALO DUNES DRIVE  |
| CITY-ST-ZIP   |  |  | 1.4 CITY-ST-ZIP              | WEST PALM BEACH, FL 33411   |
| TITLE   |  | DELETE                                 | 2.1 TITLE                    | DAVID LUCAS - (P) Change Watdition  |
| NAME  |  |  | 2.2 NAME                     | 7 FAIRWAY OAKS LANE   |
| STREET ADDRESS  |  |  | 2.3 STREET ADDRESS           |   |
| CITY-S1-ZIP   |  |  | 2 4 CHY+S1+ZIP               | ISLE OF PALMS, SC 29451   |
| TITLE   |  | L_ DELETE                              | 3 1 TITLE                    | C Change Addition   |
| NAME  |  |  | 3 2 NAME                     | PAYMON R. FINCH JR.   |
| STREET ADDRESS  |  |  | 3.3 STREET ADDRESS           | C 100 Z MC 1C/1CO   |
| CITY-ST-ZIP   |  |  | 3.4 CITY - ST - ZIP          | WEST PALM BEACH PL 33411  |
| TITLE   |  | ∐ DELETE                               | 4.1 TITLE                    | Change PAddition  |
| NAME  |  |  | 4. 2 NAME                    | MURACE PACE   |
| STREET ADDRESS  |  |  | 4.3 STREET ADDRESS           | 17 BEECHWOOD WEST   |
| CITY - ST - ZIP   |  |  | 4.4 CITY-ST-ZIP              | ISLE OF PALMS, SC 29451   |
| TITLE   |  | ☐ DELETE                               | 5.1 TITLE                    | Change 🖵 Addition   |
| NAME  |  |  | 5.2 NAME                     | STEVE MAKTINEK  |
| STREET ADDRESS  |  |  | 5.3 STREET ADDRESS           | STEVE MARTINEK<br>412 A BLACK HAWKLANE<br>ORANGUE VILLAGE   |
| CITY-S1-ZIP   |  |  | 5.4 CITY - ST - ZIP          |   |
| TITLE   |  | ☐ DELETE                               | 6.1 TITLE                    | STICHTI-ORUS, CI Change Addition  |
| NAME  |  |  | 6.2 NAME                     |   |
| STREET ADDRESS  |  |  | 6.3 STREET ADDRESS           |   |
| CITY-S1-ZIP   |  |  | 6.4 CITY- ST- ZIP            |   |
| 14. Thereby c   | ermy that the information supplied             | , with this tiling does not qualify fo | r the exemption stated       | d in Section 119.07(3)(i), Florida Statutes. I further certify that the information                 |

4. I bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutos. I further certify that the information indicated on this annual report is upplied and 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 receipter or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attatyment with an editions.

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