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 # P97000070899 (4)

ENTERTAINMENT TOUR DESIGN, INC.

Principal Place of Business	
6503 N. W STREET PENSACOLA EL 32505	

FILED Apr 13 1998 8:00am Secretary of State



rinciparriace	e Oi Business	Maining Address				}		
6503 N. W STREET PENSACOLA FL 32505		6503 N. W STREET PENSACOLA FL 32506	6503 N. W STREET PENSACOLA FL 32505					
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
						08/15/1997		j
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26		59-3464449	h	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Additional		
22		27	→			5. Certificate of Status Desired		Required
City & Stato			City & State			6. Election Campaign Financing		
23		26		Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Country			8. This corporation owes or has paid the cu		
24	25	29	30			· (□ No
	9. Name and Address of Current		100	30		10. Name and Address of New Registered		
BO	ARK, DONALD A			81	Name			
	E. GOVERNMENT STREET			L.J.				
PENSACOLA FL 32501			82 Street A		Street Ac	ddress (P.O. Box Number is Not Acceptable)		
				83				
				84	City	FI	85 Zip	Code
11. Pursuant t	to the provisions of Sections 607 0502	and 607 1508 Florida Statu	ites the al	L_i.	named co	propration submits this statement for the purpose of	of changing	its registered
office or re	ogistered agent, or both, in the Stale om familiar with, and accept the obliga	o! Florida. Such change was	authorized	d by	the corpor	ration's board of directors. I hereby accept the ap-	pointment a	s registered
SIGNATURE	Signature, typed or printed name of registered uger	it and title it applicable. (NC	TE: Registere	d Ager	t signature rec	quired when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	PRS IN 12
TITLE	D	DELE1E	1.1 11	1.1 TITLE			Change	Addition
NAME	STUTTS, JAMES A		1.2 N/	AME)			
STREET ADDRESS	6503 N. W STREET		1.3 STREET		ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32505		- 1	TY-SI	1			Í
TITLE	D	DELETE	2.1 Ti				Change	Addition
NAME	STUTTS, VELETA		22 N		ſ			(
STREET ADDRESS	6503 N. W STREET		1		ADDRESS			1
CITY-ST-ZIP	PENSACOLA FL 32505							
TITLE	D	DELETE	31 TI	ITY-SI	1-211		Change	Addition
NAME	ANTHONY, LISA	☐ btirit	3.2 N/		}		C Sumiyo	
	6503 N. W STREET				DODE			ļ
STREET ADDRESS	PENSACOLA FL 32505				ADDRESS			ļ
CITY-ST-ZIP	I CHONOCK (E 0200)	DELETI	3 4, 00		1 - 21P		DL.	Addition
TITLE		ריו מנונוו	4.5 TF		}		Change	Addition
NAME [4. 2 NA					Į.
STREET ADDRESS			1		ADDRESS			· · · · · · · · · · · · · · · · · · ·
CITY-\$1-7IP				1Y-S1	- ZIP		T-1	
TITLE		☐ DELETE	5.1 10				Change	Addition
NAME)			52 N/	AME	ł			Ì
STREET ADDRESS			5.3 ST	REET #	ADDRESS			
CITY-S1-ZIP			5.4 CI	TY - \$1	- ZIP			
TITLE		DELETE	61 1ITL				Change	Addition
NAME			6.2 N	AME]			İ
STREET ADDRESS			6.3 \$1	REET A	ADDRESS			ĺ

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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

SIGNATURE: