2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000071093

Entity Name: ALL AROUND TOWN EVENTS, INC.

FILED Feb 24, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1000 COLONY POINT DR. 2700 S. UNIVERSITY DR.

401

PEMBROKE PINES, FL 33026 DAVIE, FL 33328

Current Mailing Address: New Mailing Address:

1000 COLONY POINT DR. 2700 S. UNIVERSITY DR.

PEMBROKE PINES, FL 33026 DAVIE, FL 33328

FEI Number: 65-0774809 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CRANE, DONALD W CRANE, WILLIAM D
1000 COLONY POINT DR. #401 2700 S. UNIVERSITY DR.

PEMBROKE PINES, FL 33026 1A DAVIE, FL 33328

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: WILLIAM D. CRANE 02/24/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P/D (X) Change () Addition Name: CRANE, DONALD W Name: CRANE, WILLIAM D

 Address:
 100 COLONY POINT DR. #401
 Address:
 2700 S. UNIVERSITY DR.

 City-St-Zip:
 PEMBROKE PINE, FL 33328
 City-St-Zip:
 DAVIE, FL 33328

Title: STD () Delete Title: V/D (X) Change () Addition Name: CRANE, WILLIAM D Name: CRANE, DONALD W

 Address:
 100 COLONY POINT DR. #401
 Address:
 100 COLONY POINT DR. #401

 City-St-Zip:
 PEMBROKE PINE, FL 33328
 City-St-Zip:
 PEMBROKE PINE, FL 33328

Title: () Delete Title: S/T () Change (X) Addition

 Name:
 Name:
 CRANE, CATHERINE

 Address:
 Address:
 2700 S. UNIVERSITY DR. #1A

City-St-Zip: City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM D. CRANE P/D 02/24/2003