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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000081007 (1)

NORTH AMERICAN SPORTS MANAGEMENT XI, INC.

Principal Place of Business

Mailing Address

2200 LUCIEN WAY, STE. 450 MAITLAND FL 32751

... 2200 LUCIEN WAY: 8TE. 450" - MAITLAND PL 32781 FILED

98 APR 30 PM 2: 51

SECULIA STATE TALLAHAS EL HAGRIDA



MAILLAND FL 32791			MAHEANU PE 32/51			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
6 Deineinel Die	12.40		117211111111111111111111111111111111111			09/18/1997		
2. Principal Place of Business 21 1551 Sandspur Road			2a, Mailing Address			4. FEI Number Applied For		
Suite, Apt. #		ar koau	26 Suite, Apt. #, etc.			X   Not Applicable   S8.75 Additional		
22	-		27			5. Certificate of Status Desired Fee Required		
City & State			City & State			Election Campaign Financing \$5.00 May Be		
Maitland, Florida			28 orlando, Florida			Trust Fund Contribution Added to Fees		
Zip			Zip Country			8. This corporation owes or has paid the current year Intangible		
24 32751 25 Orange 9. Name and Address of Current			29 72822 190 30 Orange		inge	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
			· · · · · · · · · · · · · · · · · · ·	81	Name			
	rate services of Ci Ge ave., Ste. 1100	INTRAL FLURIDA						
	ANDO FL				Street	Street Address (P.O. Box Number is Not Acceptable)		
ONL	MIDO I F	02001			i			
•				84	City	FL 85 Zip Code		
11. Pursuant to	the provis	ions of Sections 607.0502	and 607.1508, Florida Statutes	, the above	i. e-named	d 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								
S	lonature, lypec	For printed name of registered ages			ont signature	re required when reinstating) DATE		
12.		OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	ONCOL	IDO ALAN LI	[ ] DETERE	1.1 TITLE		D Addition		
NAME GINSBURG, ALAN H STREET ADDRESS CITY-ST-ZIP MAITLAND FL 32751				1.2 NAME	1000000	GINSBURG, ALAN H		
				1.3 STREET 1.4 CITY - S		1001 Bandspur Road		
TITLE	MP II I LO	IND I C OE/O I	☐ DELETE	2.1 TITLE	1-21P	Maitland, FL 32751 Change Addition		
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS	7000025157374 -05/07/9801097001		
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP	***2250.00 ****150.00		
TITLE		70 de 2018 de 2018 de 2019	☐ DELETE 3.1 T			Change Addition		
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP			·····	3.4 CITY-	ST-ZIP			
TITLE			LJ OLCETE	4.1 TITLE		Change Addition		
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - S 5.1 TITLE	T-ZIP	Change Addition		
NAME			EJ OLLLIE	5.1 TITLE 5.2 NAME		A Change Addition		
STREET ADDRESS				5.3 STREET	ADDBESS	1 12 17 V		
CITY-ST-ZIP				5.4 CITY - S		yv. W		
TITLE		<del></del>	DELETE	6.1 TITLE	· +"	Change Addition		
NAME			•	6.2 NAME				
STREET ADDRESS			1	6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY - S	1 - ZIP			
14. I hereby ce	rtify that th	e information supplied will report or supplied will	h his filing does not qualify for t	the exemp	tion state	ted 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 oath; that I am an officer or director of the corporation or the receivager trustee corpowered 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 attact that an address.								