

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000083847

Entity Name

IASIS ENTERTAINMENT, INCORPORATED

**FILED**  
**Feb 08, 2000 8:00 am**  
**Secretary of State**

02-08-2000 90047 005 \*\*\*150.00

Principal Place of Business

Mailing Address

5100 S. CLEVELAND AVENUE  
#318-161  
FT. MYERS FL 33907

5100 S. CLEVELAND AVENUE  
#318-161  
FT. MYERS FL 33907-2189

Principal Place of Business

3. Mailing Address

City, Apt. #, etc.  
**MB #318-161**  
City & State

City, Apt. #, etc.  
**PMB #318-161**  
City & State

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

HANNAN-ANTON, LAURIE ESQ.  
5100 S. CLEVELAND AVENUE  
#318-161  
FT. MYERS FL 33907

4. FEI Number **65-0866717**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

**PMB # 318-161**  
City

**FL** Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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

## OFFICERS AND DIRECTORS

DP  
HANNAH-ANTON, LAURIE  
5100 S CLEVELAND AVE #318-161  
FT. MEYERS FL 33907

☐ Delete

☐ Delete

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## 12.

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition  
**HANNAN-ANTON, LAURIE**  
**5100 S. CLEVELAND AVE. PMB #318-161**  
**PORT MYERS, FL 33907**

☐ Change ☐ Addition

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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  
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 lives empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)