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FILED

Feb 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S85669 (7)  
1. Corporation Name  
TOP OF THE LINE ENTERTAINMENT CORP.

Principal Place of Business Mailing Address  
3044 SHEPHERD OF THE HILLS EXPRESSWAY  
SUITE 307  
BRANSON MO 65616  
US  
3044 SHEPHERD OF THE HILLS EXPRESSWAY  
SUITE 307  
BRANSON MO 65616  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
10/08/1991

4. FEI Number  
59-3094018  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

LOONEY, STEPHEN R  
200 SOUTH ORANGE AVENUE  
SUNTRUST CENTER-- SUITE 3000  
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

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

83

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME JOHNSON, KAREL G  
STREET ADDRESS 39 AVISTA CIRCLE  
CITY-ST-ZIP ST. AUGUSTINE FL

TITLE DS  
NAME SMITH, JEREMY  
STREET ADDRESS 391 SCOTTSDALE DRIVE  
CITY-ST-ZIP GUELPH, ONT., CANADA N1G -2W6

TITLE V  
NAME ACHTERBERG, CHARLES R  
STREET ADDRESS 3044 SHEPHERD OF THE HILLS EXPWY SUITE 307  
CITY-ST-ZIP BRANSON MO 65616

TITLE DT  
NAME GRAY, DAVID  
STREET ADDRESS 3545 OCEAN DR  
CITY-ST-ZIP VERO BEACH FL

TITLE AS  
NAME STEWART, PEGGY  
STREET ADDRESS 3044 SHEPHERD OF THE HILLS EXPWY SUITE 307  
CITY-ST-ZIP BRANSON MO 65616

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP  
1.2 NAME Johnson, Karel G.  
1.3 STREET ADDRESS 1495 Lands End Road  
1.4 CITY-ST-ZIP Manalapan, FL 33462

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 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:

Charles Achterberg/VP

CP2E034 (10/97)