

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S85669

1. Corporation Name

TOP OF THE LINE ENTERTAINMENT CORP.

Principal Place of Business

3044 SHEPHERD OF THE HILLS EXPRESSWAY
SUITE 307
BRANSON MO 65616
US

Mailing Address

3044 SHEPHERD OF THE HILLS EXPRESSWAY
SUITE 307
BRANSON MO 65616
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

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

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 the current year intangible

Personal Property Tax.

☐ Yes ☐ No

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 ☐ DELETE

NAME JOHNSON, KAREL G
STREET ADDRESS 1495 LANDS END ROAD
CITY-ST-ZIP MANALAPAN FL 33462

TITLE DS ☐ DELETE

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

TITLE V ☒ DELETE

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

TITLE DT ☐ DELETE

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

TITLE AS ☐ DELETE

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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE DS ☒ Change ☐ Addition

2.2 NAME SMITH, JEREMY

2.3 STREET ADDRESS 167 FIFE ROAD

2.4 CITY-ST-ZIP GUELPH, ONT., CANADA N1H 7J3

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: Peggy Stewart, AS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/99

Date

417-339-4405

Daytime Phone #

0594326

CR2E034 (1/1/98)

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90020 042 ***158.75

