

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

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # V18188 (5)
1. Corporation Name
BLUE RIDGE PRODUCTIONS, INC.

Principal Place of Business

945 N. PASADENA
SUITE 100
MESA AZ 85201

Mailing Address

945 N. PASADENA
SUITE 100
MESA AZ 85201-4319

FILED

98 FEB 17 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/03/1992		3a. Date of Last Report 05/09/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

IHRIG, WILLIAM KENT
ANDERSON & ORCOTT, P.A.
401 E. JACKSON STREET, STE. 2400
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name	MARK C. OLSEN
82 Street Address (P.O. Box Number is Not Acceptable)	MORGAN, OLSEN & OLSEN
83	315 NE 3rd Avenue, Suite 200
84 City	FORT LAUDERDALE
85 Zip Code	FL 33301

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE *Mark C. Olsen* DATE 1/29/98

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FELKER, EUGENE M.	1.2 NAME	500002434545--1
STREET ADDRESS	945 NO. PASADENA #100	1.3 STREET ADDRESS	-02/18/98--01083--033
CITY-ST-ZIP	MESA AZ 85201	1.4 CITY-ST-ZIP	****150.00 ****150.00
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANSPERGER, JONN R.	2.2 NAME	P.O. BOX 685 (N/A)
STREET ADDRESS	4501 NO. O'CONNOR #1103	2.3 STREET ADDRESS	BAMA N.M. 87321-0685
CITY-ST-ZIP	IRVING TX 75062	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	500002434545--1
STREET ADDRESS		3.3 STREET ADDRESS	-02/18/98--01083--034
CITY-ST-ZIP		3.4 CITY-ST-ZIP	****750.00 ****750.00
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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, changed, or on an attachment with address.

SIGNATURE *Eugene M. Felker* 11-17-97 607 1/19/98

CR2E034 (9/96)