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FILED
May 13 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 # **V43209** (8)
1. Corporation Name
OSCEOLA DOWNS, INC.

Principal Place of Business
**1790 KING HENRY DRIVE
KISSIMMEE FL 34744-8414**

Mailing Address
**1790 KING HENRY DRIVE
KISSIMMEE FL 34744-8414**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/12/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3168179	
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" 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	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent GINTHER, THOMAS A 1790 KING HENRY DRIVE KISSIMMEE FL 34744-8414				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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	
NAME	BROWN, JERRY LEE	1.2 NAME	
STREET ADDRESS	2244 HAM BROWN RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34744-8414	1.4 CITY-ST-ZIP	
TITLE	T	2.1 TITLE	
NAME	BROWN, JACQUELINE ANN	2.2 NAME	
STREET ADDRESS	2244 HAM BROWN RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34744-8414	2.4 CITY-ST-ZIP	
TITLE	P	3.1 TITLE	
NAME	RAMSEY, GRANVILLE R.	3.2 NAME	
STREET ADDRESS	853 SAN JOSE COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34758	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	
NAME	GINTHER, THOMAS ALLAN	4.2 NAME	
STREET ADDRESS	1790 KING HENRY DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34744-8414	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 in an attachment with an address.

SIGNATURE:

Thomas A. Gintner

27 - April 98 407 344 2278

CR2E034 (10/97)