

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **V73141** (6)

1. Corporation Name

FIRST AMERICAN GAMING CORPORATION

SEP 16 PM 12:38



Principal Place of Business

655 OLD DIXIE HWY SW
VERO BEACH FL 32962-4528

Mailing Address

655 OLD DIXIE HWY SW
VERO BEACH FL 32962-4528

3. Date Incorporated or Qualified
10/20/1992

3a. Date of Last Report
08/14/1995

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

29 30

4. FEI Number
65-0387840

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HELSETH, CHARLES W.
655 OLD DIXIE HWY SW
VERO BEACH FL 32962-4528

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 date of signature

DATE Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE CCEO
NAME HELSETH, CHARLES W.
STREET ADDRESS 655 SW OLD DIXIE HWY
CITY- ST- ZIP VERO BCH FL

☐ DELETE

TITLE D
NAME WEINGARD, JOSEPH D
STREET ADDRESS 185 NW SPANISH RIVER BLVD, 170
CITY- ST- ZIP BOCA RATON FL

☐ DELETE

TITLE PDCO
NAME MORRIS, SHELBY L.
STREET ADDRESS 3109 BIRCH ST.
CITY- ST- ZIP PALM BCH GARDENS FL

☐ DELETE

TITLE D
NAME FRANK, JOEL
STREET ADDRESS 6073 STIRLING RD
CITY- ST- ZIP HOLLYWOOD FL

☐ DELETE

TITLE D
NAME SAMMON, PAUL
STREET ADDRESS RR 1 BOX 66A
CITY- ST- ZIP COXSACKIE NY

☐ DELETE

TITLE D
NAME DESCHEENY, ALBERT
STREET ADDRESS P O BOX 2328 NA
CITY- ST- ZIP CHINLE AZ

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

000001958260
-09/26/96--01081--011
****233.75 ****233.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles W. Helseth, C.E.O. (561) 569-3808

Date

Printing Place

CR2E034 (12/95)