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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 363810 COLUMBIA PUBLICATIONS, INC.

(3)

## **FILED** May 15 1998 8:00am Secretary of State

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Principal Place	of Business	Mailing Address			1 (20102 11)10 01179 11101 18101 11011 4011 1101	) WIST WIPH VIOL BIE1	J 81817 1887
1178 FORREST BLVD. P.O. DRAWER 1107 DECATUR GA 30031-8107 DECATUR GA 30031-8107				DO NOT WRITE IN T	THIS SPACE		
					3. Date Incorporated or Qualified		
					05/08/1970		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
21		26			59-1550986		ot Applicable
Suite, Apt 22	# etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired
City & State		Gity & State			<b>6.</b> Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees
Zip	Country	Zφ	Count	гу	8. This corporation owes or has paid th	e current year Inf	angible
24	25 29 30			Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	red Agent	
NO	rris, John E.		8	1 Name			
201 N.MARION ST.,STE.301 LAKE CITY FL 32055			8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	AL OIT TE SEGOO		8	3			
			8	4 City		85 Zip	Code
11.0					prporation submits this statement for the purpo	FL 6 2 P	
agent Lai	egistered agent, or both, an the Stat in familiar with, and accept the obli Significations of post-disconnections are	gations of Section 607.0505,	Florida Statut	es.	ration's board of directors. I hereby accept the	appointment as	registered
12.		VO DIRI CTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	STD	DELETE	1.1 113£E			Change	■ Addition
NAME	HAGOOD, DONNA		1.2 NAM				
STREET ADDRESS	2851 ROYAL PATH CT.		1.3 STRE	E1 ADDRESS			
CITY-ST-ZIP	DECATUR GA		1.4 CITY				1.120
T#TLE	PD	☐ DELETE	2111111	- 1		Change	Addition
NAME	HAGOOD, THOMAS R. JR.		2.2 NAM				
STREET ADDRESS	1178 FORREST BLVD.			ET ADDRESS			
CITY-ST-ZIP	DECATUR GA	T beleve	2 4 CITY			Change	Letation
THILE		☐ DELETE	3 1 1171.6			Change	☐ Addition
NAME			3.2 NAM	1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELETE	3.4. City			Change	Addition
TITLE		בן וענונו	41 11116	1		Cuange	
NAME			4 2 NAM				
STREET ADDRESS				E1 ADDRESS			
CITY-ST-ZIP THLE	,	DELETE	4.4 CITY 5.1 THUE			Change	Addition
NAME		C Milit	5.1 MAM			L. Vialigo	1.00.101
STREET ADDRESS				ET ADDRESS			
i i			5.4 CITY	1			
CITY-ST ZIP		DELETE	61 TITLE			Change	Addition
NAME			6.2 NAM			vgo	
				ET ADDRESS			
STREET ADDRESS				- 1			
CITY-S1-ZIP	<del></del>		64 CHY	- 51 - ZIP	Castian 440 07/2)/// Florida Statuton   furth		. Intermediae

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 informatic 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 this 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 attauhment with an address