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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M79006

(6)

PUBLISHERS CERTIFIED SERVICE, INC.

Principal Plac- 133 EAST CHU LONGWOOD FI	IRCH AVENUE	Mailing Address P.O. BOX 520807 LONGWOOD FL 32752	P.O. BOX 520807 LONGWOOD FL 32752-0807					
US		U\$			3. Date Incorporated or Qualified	3a. Date of	Last Re	eport
					04/19/1988	10/02/1	996	
2. Principal P	Place of Business	2a. Mailing Address			4- FEI Number		Ap	plied For
21		26			59-2890873			t Applicable
Suite Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	- L	8.75 A Fee Re	Additional quired
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	'	5.00 Added to	May Be o Fees
Zφ	Country	Ζip	Cou	ntry	8. This corporation has liability for	intangible tax ι	ınder s.	199.032,
24	25	29	30			Yes 🗌 No		
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agen	t	
NAC	e, robert g.			81 Name				
133 E. CHURCH AVE.			-	82 Street Add	dress (P.O. Box Number is Not Acceptable)			
LON	IGWOOD FL 32750		•	83				
				84 City		F1 85	Zip C	Code
office or r	registered agent, or both, in the S	itate of Florida. Such change w	ras authorized	by the corpora	poration submits this statement for the pation's board of directors. I hereby acce	ourpose of char pt the appointm	nging its nent as	registered registered
SIGNATURE	milamiliar with and accept the o	ongalions of, accitor borloso	i, monoa siau	utes.				
12.	Signature typed or period name of registers		(NOTE Registered	Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	FOTOD	C III 40
TITLE	D	AND DIRECTORS	1.1 [[]	16	ADDITIONS/CHANGES TO OFFIC		Change	S IN 12
NAME	NACE, ROBERT G.	L Dittil		i			manye	L Addition
STREET ADDRESS	133 E. CHURCH AVE.		1.2 NA					
CITY-ST-ZIP	LONGWOOD FL 32750			REET ADDRESS TY - ST - ZIP				
TITLE	LONGITOOD IL DEIDO	DELETE	2.1 TIT			П.	Change	Addition
NAME		— · · · ·	2 2 NA					
STREET ADDRESS				REET ADDRESS				
City-St zir				TY-ST-ZIP				
1/1LE		DELETE	3.1 111				Change	Addition
NAME		_	3.2 NA				•	_
STREET ADDRESS				REET ADORESS				
CITY-ST-ZIP				TY - ST - ZIP				
TITLE		DELETE	4.1 111				Change	Addition
NAME			4. 2 N/	W E				
STREET ADDRESS				REET ADDRESS				
CITY - ST - ZIP			4.4 CI	IY-ST-ZIP				
Trice		☐ DELETE	5.1 TIT				Change	Addition
NAME			5.2 NA	MÉ				
STREET ADDRESS			5.3 ST	REET ADORESS				
CITY - ST - ZIP			5.4 CI	TY - ST - ZIP				
TITLE		☐ DFLETE	61 717	Lŧ			Change	Addition
NAME			6.2 NA	M5				
STREET ADDRESS			6351	ree1 address				
CITY - \$1 - 71P				IY - ST - ZIP				
informatic	on indicated on this annual report	or supplemental annual report	l is true and a	ccurate and the	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	al effect as if ma	ade und	der oath; tha
Lam an o	officer or director of the corporation in Block 12 or Block 13 if change	in or the receiver or trustee em	powered to e	xecute this repo	ort as required by Chapter 607, Florida 9	Statutes; and th	at my n	ame

R.G. NACE AND THE COLUMN TO