

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

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95 MAY -1 AM 10:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **N48890**

1. Corporation Name

**Terra Incognita Publishing**

Principal Place of Business

Mailing Address

**Terra Incognita Publishing  
14. E. University Ave. #206  
Gainesville FL 32601**

800001475338  
-05/04/95--01023--017

\*\*\*\*130.00 \*\*\*\*130.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>5/15/92</b>	3a. Date of Last Report <b>8/18/94</b>
4. FEI Number <b>59-3132760</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability of intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suito, Apt. #, etc.	26 Suito, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 County	29 County
<b>Alachua</b>	

9. Name and Address of Current Registered Agent

**Timothy J. Hill  
911 N.E. 3rd Ave. # 2  
Gainesville, FL 32601**

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, Sections 607.0505, Florida Statutes.

SIGNATURE *Timothy Hill* DATE **4/21/95**

12. OFFICERS AND DIRECTORS

TITLE	<b>President</b>
NAME	<b>Colia Whitworth</b>
STREET ADDRESS	<b>2102-A, NW 7th St</b>
CITY - ST - ZIP	<b>Gainesville FL 32609</b>
TITLE	<b>Vice President</b>
NAME	<b>Michael B. Podolsky</b>
STREET ADDRESS	<b>911 N.E. 3rd Ave #1</b>
CITY - ST - ZIP	<b>Gainesville FL 32601</b>
TITLE	<b>Treasurer</b>
NAME	<b>Timothy J. Hill</b>
STREET ADDRESS	<b>911 NE 3rd Ave #2</b>
CITY - ST - ZIP	<b>Gainesville, FL 32601</b>
TITLE	<b>Secretary</b>
NAME	<b>Amy Podolsky</b>
STREET ADDRESS	<b>911 NE 3rd Ave. #1</b>
CITY - ST - ZIP	<b>Gainesville FL 32601</b>
TITLE	<b>Director</b>
NAME	<b>Mark E. Worth</b>
STREET ADDRESS	<b>911 N.E. 3rd Ave. #1</b>
CITY - ST - ZIP	<b>Gainesville FL 32601</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE: *Timothy Hill* DATE **4/21/95** **904)3775374**

TIMOTHY J. HILL