

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90010 002 ***150.00

DOCUMENT # P01000030884

1. Entity Name

PENNY SAVER WEEKLY NEWS, INC.

Principal Place of Business

~~8608 N. SUWANEE AVE~~
~~TAMPA FL 33604~~

10546 N. Florida Ave
Tampa, FL 33612

Mailing Address

~~8608 N. SUWANEE AVE~~
~~TAMPA FL 33604~~

10546 N. Florida Ave
Tampa, FL 33612

2. Principal Place of Business

10546 N. FLORIDA AVE

3. Mailing Address

10546 N. FLORIDA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

Zip

33612

Country

USA

Zip

33612

Country

USA

4. FEI Number

59-3711391

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HOPE, LINDA G
~~8608 N. SUWANEE AVE~~
~~TAMPA FL 33604~~

Name

Street Address (P.O. Box Number is Not Acceptable)

10546 N. FLORIDA AVE

City

TAMPA

FL

Zip Code

33612

7. Name and Address of New Registered Agent

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Linda G Hope

4/18/02

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	HOPE, LINDA G	
STREET ADDRESS	8608 N. SUWANEE AVE	
CITY-ST-ZIP	TAMPA FL 33604	
TITLE	D	☐ Delete
NAME	HOPE, LINDA B	
STREET ADDRESS	8608 N. SUWANEE AVE	
CITY-ST-ZIP	TAMPA FL 33604	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	10546 N. FLORIDA AVE.	
STREET ADDRESS	TAMPA, FL 33612	
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	10546 N. FLORIDA AVE	
STREET ADDRESS	TAMPA, FL 33612	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda G Hope

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/02 (813)935-3115

Date

Daytime Phone #

CR2E034 (9/01)