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Feb 24, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000033684

1. Corporation Name
NEWSPAPER PUBLISHERS, INC.



Principal Place of Business: 1004 ISLAND MANOR DR. WEST PALM BEACH FL 33413
 Mailing Address: 1004 ISLAND MANOR DR. WEST PALM BEACH FL 33413

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/13/1998
 4. FEI Number: 65-0835271
 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 owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: 12788 Forest Hill Blvd, Suite 1003, Wellington FL 33414
 2a. Mailing Address: [Blank]
 21, 22, 23, 24, 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
MANNING, PHYLLIS
 1004 ISLAND MANOR DR.
 WEST PALM BEACH FL 33413

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, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS
 1.1 TITLE: D
 1.2 NAME: MANNING, BARRY
 1.3 STREET ADDRESS: 701 S.E. 6TH AVENUE, SUITE 201
 1.4 CITY-ST-ZIP: DELRAY BEACH FL 33483
 [Repeat for other officers]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 2.1 TITLE: [Blank]
 2.2 NAME: [Blank]
 2.3 STREET ADDRESS: 12788 FOREST HILL BLVD, Suite 1003
 2.4 CITY-ST-ZIP: WELLINGTON FL 33414
 [Repeat for other additions]

14. 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 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, with all other like empowered.

SIGNATURE: _____ Date: 1/11/99 Daytime Phone #: 561-793-7606

CR2E034 (11/98)