

# T98000000533

Requestor's Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone # \_\_\_\_\_

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 -05/11/98--01112--007  
 \*\*\*\*\*87.50 \*\*\*\*\*87.50

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Cotton & Quail Antique Trail (16)  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in     
  Pick up time \_\_\_\_\_     
  Certified Copy  
 Mail out     
  Will wait     
  Photocopy     
  Certificate of Status

FILED  
 98 MAY 11 AM 10:20  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

T98-533

Name	
Availability	<i>ny</i>
Document Examiner	NJC
Updater	NJC
Updater Verifier	NJC
Acknowledgement	NJC
P. Verifier	NJC

Examiner's Initials	
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**APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK**  
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

**TO: Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314**

**Name & address to whom acknowledgement should  
be sent:**

Susan D. Smith  
150 W. Brambleton Avenue  
Norfolk, Virginia 23510  
(757) 446-2013  
Daytime Telephone number

**PART I**

1. (a) Applicant's name: Regional Antique Publications, Inc.

(b) Applicant's business address: 150 W. Brambleton Avenue  
Norfolk, Virginia 23510  
City/State/Zip

(c) Applicant's telephone number: (757) 446-2013

Individual     Corporation     Joint Venture     Other: \_\_\_\_\_  
 General Partnership     Limited Partnership     Union

If other than an individual,  
(1) Florida registration number: F98000001396 ✓    (2) Domicile State: Virginia

(3) Federal Employer Identification Number: 54-1869576

2.(a) If the mark to be registered is a service mark, the services in connection with which the mark is used:  
(i.e., furniture moving services, diaper services, house painting services, etc.)

\_\_\_\_\_

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:  
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

name of magazine publication

(c) The mode or manner in which the mark is used: (i.e., labels, decals, newspaper advertisements, brochures, etc.)

name of magazine - found at top of front  
page

(Continued)

(d) The class(e) in which goods or services fall:

Class 16 - paper goods and printed matter

**PART II**

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: March, 1988 (b) Date first used in Florida: March, 1988

**PART III**

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

word mark "Cotton & Quail Antique Trail"

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2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "Antique Trail"

" APART FROM THE MARK AS SHOWN.

I, Susan D. Smith, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct.

Regional Antique Publications, Inc.

Typed or printed name of applicant

Susan D. Smith Assistant Secretary

Applicant's signature or authorized person's signature  
(List name and title)

STATE OF Virginia

CITY OF Norfolk  
COUNTY OF Norfolk

On this 1<sup>st</sup> day of May, 19 98, Susan D. Smith personally appeared before me,

- who is personally known to me
- whose identity I proved on the basis of \_\_\_\_\_

Carmela E. Dorto  
Notary Public Signature

CARMELA E. DORTO  
Notary's Printed Name

Seal

My Commission Expires: Nov. 30, 2001

FEE: \$87.50 per class



Cotton  
&  
Quality



Antique  
Fiber

BULK RATE  
U.S. POSTAGE PAID  
THOMASVILLE, GA  
PERMIT 30

Vol. 10, No. 6

100 Pages - Two Sections

April, 1998