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FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 133539 (7)
1. Corporation Name
CELERY PRINTING COMPANY



Principal Place of Business Mailing Address
P O BOX 179 P O BOX 179
221 MAGNOLIA 221 MAGNOLIA
SANFORD FL 32771 SANFORD FL 32771

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		12/14/1936	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-0188630	
24 Country		30 Country		5. Certificate of Status Desired	
				Applied For	
				Not Applicable	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CANNON, L. KINDER, III
2000 INDEPENDENT SQUARE
JACKSONVILLE FL 32202

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

Signature: typed or printed name of registered agent and titled applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	1.1 TITLE	DP
NAME	LAWRENCE, BYRON R.	1.2 NAME	LAWRENCE, BYRON R.
STREET ADDRESS	2375 FLAMINGO WAY	1.3 STREET ADDRESS	2375 FLAMINGO WAY
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	WINTER PARK, FL
TITLE	C	2.1 TITLE	TS
NAME	LAWRENCE, BYRON R	2.2 NAME	WOOD, LARRY
STREET ADDRESS	2375 FLAMINGO WAY	2.3 STREET ADDRESS	147 LIVE OAK RD.
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP	WINTER GARDEN, FL
TITLE	L	3.1 TITLE	
NAME	LAWRENCE, BYRON R.	3.2 NAME	
STREET ADDRESS	2375 FLAMINGO WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 president 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.

SIGNATURE

7-17-98 467332-2581

CR2E034 (10/97)