## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 143942**

FILED Sep 14, 2009 Secretary of State

Entity Name: FLORIDA SENTINEL-TAMPA BULLETIN PUBLISHING CO.

**Current Principal Place of Business: New Principal Place of Business:** 2207 E. 21ST AVENUE TAMPA, FL 33605 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 3363 2207 21ST. AVE. TAMPA, FL 33601 FEI Number: 59-0559227 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDREWS, C BLYTHE 2207 21ST AVE. TAMPA, FL 33605 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ANDREWS, CYRIL B CEO Name: Name: 2207 21ST AVE. Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: Title: Title: TD () Delete (X) Change ( ) Addition ANDREWS. W. W. Name: Name: ANDREWS, C. BLYTHE, III 2207 21ST AVE. 2207 21ST AVE. Address: Address: TAMPA, FL TAMPA, FL City-St-Zip: City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition ANDREWS, GLORIA ANDREWS, S. KAY Name: Name: 2207 21ST AVENUE 2207 21ST AVENUE Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL Title: ( ) Delete Title: (X) Change ( ) Addition ANDREWS, C. BLYTHE III ANDREWS, GLORIA Name: Name: Address: 2207 21ST AVENUE Address: 2207 21ST AVENUE City-St-Zip: City-St-Zip: TAMPA, FL 33605 US TAMPA, FL 33605 US Title: (X) Delete Title: () Change () Addition ANDREWS, S. KAY Name: Name: 2207 E. 21ST AVE. Address: Address: City-St-Zip: TAMPA, FL 33605 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. KAY ANDREWS WELLS DIR 09/14/2009