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FILED

Jan 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 176881

(1)

1. Corporation Name  
PUBLISHERS INC.



Principal Place of Business  
6278 N FEDERAL HWY  
STE 274  
FT LAUDERDALE FL 33308  
US

Mailing Address  
6278 N FEDERAL HWY  
STE 274  
FT LAUDERDALE FL 33308-1916  
US

3. Date Incorporated or Qualified  
01/09/1954

3a. Date of Last Report  
04/16/1996

2. Principal Place of Business  
21 901 Winding River Road  
Suite, Apt. #, etc.

2a. Mailing Address  
26 901 Winding River Road  
Suite, Apt. #, etc.

4. FEI Number  
59-0746103

Applied For  
Not Applicable

22 City & State  
23 Vero Beach FL  
24 Zip 32963  
25 Country USA

27 City & State  
28 Vero Beach FL  
29 Zip 32963  
30 Country USA

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHMIDT, TED  
2149 N.E. 63 ST  
FT. LAUDERDALE FL

81 Name Ted Schmidt  
82 Street Address (P.O. Box Number is Not Acceptable)  
901 Winding River Road  
83  
84 City Vero Beach FL 85 Zip Code 32963

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 *Ted Schmidt*  
Signature of officer or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 1/21/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME SCHMIDT, LORI K.  
STREET ADDRESS 2149 N.E. 63 ST.  
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

1.1 TITLE V.P., D.S. ☒ Change ☐ Addition  
1.2 NAME Lori Schmidt  
1.3 STREET ADDRESS 901 Winding River Road  
1.4 CITY-ST-ZIP Vero Beach FL 32963

TITLE STD  
NAME SCHMIDT, TED  
STREET ADDRESS 2149 N.E. 63 ST.  
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

2.1 TITLE P.D.T. ☒ Change ☐ Addition  
2.2 NAME Ted Schmidt  
2.3 STREET ADDRESS 901 Winding River Road  
2.4 CITY-ST-ZIP Vero Beach, FL 32963

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: *Ted Schmidt*

1/21/97 561.234.7200

CP2E034 (9/96)