

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 11 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 # **257222** (0)
1. Corporation Name
NEWS-STAR PUBLICATIONS, INC.



Principal Place of Business 1250 BUSINESS WAY LEHIGH ACRES FL 33936 US	Mailing Address PO BOX 908 LEHIGH ACRES FL 33970-0908 US
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1250 BUSINESS WAY Suite, Apt. #, etc 22 City & State 23 LEHIGH ACRES FL Zip Country 24 33936 25 USA		2a. Mailing Address 26 P O BOX 908 Suite, Apt. #, etc 27 City & State 28 LEHIGH ACRES FL Zip Country 29 33970-0908 30 USA		3. Date Incorporated or Qualified 03/23/1962	
		4. FEI Number 59-0953412		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VERNEAU, PATRICIA E
1250 BUSINESS WAY
LEHIGH ACRES FL 33936**

81 Name CUPTIS P. MIDDLETON
82 Street Address (P.O. Box Number is Not Acceptable) 1250 BUSINESS WAY
83 LEHIGH ACRES
84 City FL
85 Zip Code 33936

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 *Curtis P. Middleton* **CUPTIS P MIDDLETON** **JANUARY 19, 1998**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATEMAN, JUNE	1.2 NAME	
STREET ADDRESS	1250 BUSINESS WAY	1.3 STREET ADDRESS	
CITY - ST - ZIP	LEHIGH FL	1.4 CITY - ST - ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'SULLIVAN, NEIL	2.2 NAME	
STREET ADDRESS	1250 BUSINESS WAY	2.3 STREET ADDRESS	
CITY - ST - ZIP	LEHIGH FL	2.4 CITY - ST - ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGILICKIS, RICHARD	3.2 NAME	
STREET ADDRESS	1250 BUSINESS WAY	3.3 STREET ADDRESS	
CITY - ST - ZIP	LEHIGH ACRES FL	3.4 CITY - ST - ZIP	
TITLE	VD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANNASSEE, LYNN	4.2 NAME	
STREET ADDRESS	1250 BUSINESS WAY	4.3 STREET ADDRESS	
CITY - ST - ZIP	LEHIGH ACRES FL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONTI, BARBARA	5.2 NAME	
STREET ADDRESS	1250 BUSINESS WAY	5.3 STREET ADDRESS	
CITY - ST - ZIP	LEHIGH ACRES FL	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'SULLIVAN, CORNELIUS P	6.2 NAME	
STREET ADDRESS	311 HOMESTEAD RD.	6.3 STREET ADDRESS	
CITY - ST - ZIP	LEHIGH FL 33936	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 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: *Neil O'Sullivan* **NEIL O'SULLIVAN** **JANUARY 19, 1998** (941) 369-6161
FEBRUARY 5-1998

CP2E034 (10/97)