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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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## DOCUMENT # 393185

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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PRINCE PUBLISHING, INC.

	•			
Principal Place of Business	Mailing Address			
1600 CAPITAL CIRCLE, S.W.	1600 CAPITAL CIRCLE, S.W.			
TALLAHASSEE FL 32310-9246	TALLAHASSEE FL 32310-9246			

Country

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## **FILED** Jan 21, 1999 8:00am **Secretary of State**

01-21-1999 90012 034 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

□No

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

Personal Property Tax.

12/27/1971

59-1401501

4. FEI Number

Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			81	Name			
LOWE, FRANCIS CASEY.  1600 CAPITAL CIR SW			82	Chunch	Address (D.O. Boy Norther is Not Assessed		
			02	82 Street Address (P.O. Box Number is Not Acceptable)			
TALL	AHASSEE FL 32310		83			,	
	•					·	
			84	City		FI 85 Zip C	Codé
11 Dursuant	to the provisions of Sections 607.0502 and 607.15	NS Florida Statutes	the above	a_namad	cornoration submits this statement for the nu		registered
office or r	egistered agent, or both, in the State of Florida, Su	ch change was auth	norized by	the corpo	pration's board of directors. I hereby accept	he appointment as rec	gistered
agent. I a	m familiar with, and accept the obligations of, Secti	on 607.0505, Florid	a Statutes	•			
SIGNATURE							
12.	Signature, typed or printed name of registered agent and title if applica  OFFICERS AND DIRECTOR		egistered Agen	t signature n	equired when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE	DS IN 12
	CFO	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	Addition
TITLE			1			□ change	L Addition
NAME	HARDY, ROBERT		1.2 NAME				
STREET ADDRESS	1600 CAPITAL CIRCLE SW		1.3 STREET	ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL 32310		1.4 CITY-S1	r-ZIP			
TITLE	PD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	PRINCE, R.		2.2 NAME				
STREET ADDRESS	1600 CAPITAL CIR., S.W.		2.3 STREET	ADDRESS			1
CITY-ST-ZIP	TALLAHASSEE FL 32310		2.4 CITY-S	T-21P			
TITLE	VS	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME:	LOWE, FRANCES C		3.2 NAME				
STREET ADDRESS	1600 CAPITAL CIRCLE SW		3.3 STREET	ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY-S	T-ZIP			ì
TITLE .	. •	☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP	* * ,		4.4 CITY-ST				ŀ
TITLE		☐ DELETE	5.1 TITLE	-21		☐ Change	Addition
NAME			5.2 NAME				_
_			5.3 STREET	ADORESS			
STREET ADDRESS	3 to		5.4 CITY-ST				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	- 417		☐ Change	Addition
TITLE		C DEFERE	6.2 NAME				
NAME				1000000			
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP			6.4 CITY-ST				
14. I hereby o	ertify that the information supplied with this filing do	pes not qualify for the	e exemption	on stated	in Section 119.07(3)(i), Florida Statutes. I fu	irther certify that the in	ntormation

Country

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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, with all other like empowered.

Robert Hardu

CR2E034 (11/98)