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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 438977

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THE E

| BRADENTON | HERALD, | INC. | |
|-----------|---------|------|--|
| | | | |

FILED May 09 1997 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | |] | BLEIT BINGT BI | BII DIDII OKBAL | | | |
|---|---|--|-----------------|--------------|--------------------------------------|--|-----------------|-------------------------------|-----------------|-------------|
| 102 MANATEE AV W P O BOX 621 BRADENTON FL 34206 | | 102 MANATEE AV W P O BOX 921 BRADENTON FL 34206-09. | | | | | | | | |
| | | | | | | 3. Date incorporated or Qualified 10/26/1973 | | te of Last R 9/1996 | eport | |
| 2. Principal Place of Business 2a. Mailing Address | | 2a. Mailing Address | | | v==/ | 4. FEI Number | | | plied For | 1 |
| 21 | | 26 | | | | 59-1487839 | | No | t Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | Additional | |
| 22 City & Stat | | City & Ctata | | | | | | | equired | 4 |
| ` | е | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | \Box | \$5.00 Added | May Be | |
| Zip | Country | | Cou | ntry | ************ | 8. This corporation has liability for | intendible | | | ┪ |
| 24 | 25 | 29 | 30 | , | | 1 | Yes | _ | . 100.002, | |
| | 9. Name and Address of Curre | nt Registered Agent | | | | 10. Name and Address of New Re | gistered / | \gent | | |
| CT C | ORPORATION SYSTEM | | | 81 N | lame | | | | | |
| 1200 S. PINE ISLAND ROAD | | ŀ | B2 S | treet Addres | ss (P.O. Box Number is Not Acceptate | ole) | | | 1 | |
| PLA | NTATION FL 33324 | | ļ | | | | | | | 1 |
| | | | | 83 | | | | | | |
| | | | İ | 84 (| dy | | FI | 85 Zip | Code | |
| 11. Pursuant | to the provisions of Sections 607 050 | 02 and 607 1508 Florida Statu | ites the at | nove-n | amed corpo | oration submits this statement for the p | | changing it | s registered | \dashv |
| office or r | registered agent, or both, in the State im familiar with, and accept the oblig | e of Florida. Such change was | authorized | by th | e corporatio | on's board of directors. I hereby accept | ot the app | ointment as | registered | |
| • | on lamiliar with, and accept the oblig | jations of, Section 607,0000, r | ionina otan | JIES. | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered ag | ont and title if applicable. (NO | Tt - Rog-stered | Agent s | ignature required | d when reinstating) | DATE | | | |
| 12. | OFFICERS AN | ND DIRECTORS | 13. | ~~~ | | ADDITIONS/CHANGES TO OFFIC | ERS AND | | | ો <u>ર્</u> |
| TITLE | P | ∑ DELETE | 1.1 1)1 | l E | AS' | T | | Change | X Addition | Ş |
| W. C. | RIDINGS, DOROTHY S. | | 1.2 NA | | | ce, Luis A. | | | | Š |
| IESS 2.3 | 102 MANATEE AVE W | | | REET ADE | | 2 Manatee Ave. W. | | | | Ų |
| | BRADENTON FL | DELETE | 2.1 T/I | Y-ST-Z | ⊩_ Br≀ | adenton,_FL_34205 | š | Change | Addition | ١è |
| | HARRIS, DOUGLAS C. | La preside | 2.1 III | | } | | | Onlingo | [] Modifical | 1 |
| STREET ADDRESS | ONE HERALD PLAZA | | | REET ADO | OBESS | | | | | |
| CITY-ST-ZIP | MIAMI FL | | | TY-\$1-2 | | | | | | |
| TITLE | V | ☐ DELETE | 3.1 TIT | | | | | Change | Addition | 1 |
| NAME | POSTON, WAYNE H. | | 3.2 NA | ME | | | | | | |
| STREET ADDRESS | 102 MANATEE AVENUE, W. | | 3.3 ST | REE1 ADI | DRESS | | | | | |
| CITY-ST-ZIP | BRADENTON FL | IO DELEGA | | 1Y-S1-2 | IIP III | | | | F 7 7 1 1 1 1 1 | 4 |
| TITLE | AST | ⊠ DELE1E | 4.1 111 | | | | | L. Change | L_] Addition | |
| NAME | WATSON,DONALD J | | 4. 2 N/ | | 20,00 | | | | | |
| STREET ADDRESS | 102 MANATEE AVE W BRADENTON FL | | | REET ADE | | | | | | |
| CITY-ST-ZIP TITLE | V | DELETE | 4.4 CI | Y-S1-Z LE | <u>"</u> | · · · · · · · · · · · · · · · · · · · | | Change | ☐ Addition | 1 |
| NAME | TURNER, ROBERT G | Name of the Control o | 5.2 NA | | } | | | | | 1 |
| STREET ADDRESS | 102 MANATEE AVE W | | | REEL ADD | DRESS | | | | | |
| CITY-ST-ZIP | BRADENTON FL | | | Y-\$1-Z | ŀ | | | | | |
| TITLE | P | DELETE | 6.1717 | LE | | | | Change | Addition | 1 |
| NAME | WELLS, CRAID D. | | 6.2 NA | Mξ | We: | lls, Craig D. | | | | |
| STREET ADDRESS | 102 MANATEE AVE. W. | | 6.3 \$1 | REET ADO | DRESS | _ | | | | |
| CITY-ST-ZIP | BRADENTON FL | | 6.4 (0) | Y-S1-2 | IP | | | | | 1 |

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 logal 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 changer, or on an attachment with an address.

4/10/07