| | NOW: FILING FE | E AFTEF | R MAY 1ST | IS \$55 | 0.00 | | - | FILE | | |
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| | | | FLORIDA DEPA | | | | May 15 | 199 | 88 | :00a |
| ANNUAL REPORT | | Secretary of Sta DIVISION OF CORPOR | | | tate | | Secretary of State | | | |
| | MENT # 4587 Name NGO BROADCASTING C | | (8) | | <u></u> | | | | | |
| ncipal Place | e of Business | Mai | ling Address | | | | | UUH UUM UUUH U | H H HI H | |
| P O BOX 10729 P O BOX 10729 JACKSONVILLE FL 32247-7729 JACKSONVILLE FL 32247-7729 | | | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | | Date Incorporated or Qualified 07/30/1974 | . | | |
| Principal Pi | lace of Business | <u>}</u> | Mailing Address | | | | 4. FEI Number | | | plied For |
| Suite, Apt. | #, etc. | 26 | Suite, Apt. #, etc. | · · · | | | 59-2562662 5. Certificate of Status Desired | | \$8.75 | ol Applicable Additional |
| City & State | 9 | 27 | City & State | | <u>.</u> | | 6. Election Campaign Financing | | Fee Re \$5.00 | equired |
| | Country | 28 | Zip | Cour | des s | | Trust Fund Contribution | | Added | o Fees |
| | 25 | 29 | | 30 | шту | | This corporation owes or has p Personal Property Tax due Jun | e 30. 🗋 | Yes [| angible] No |
| MC | 9. Name and Address of Cu CORKLE, THOMAS J | rrent Registe | ered Agent | | 81 Name | | 10. Name and Address of New R | egistered Ag | pent | |
| 104 | 475-110 FORTUNE PARKWA | Y | | - | 32 Street | Addres | is (P.O. Box Number is Not Accepta | ble) | | |
| | | | | | | | | | | |
| JA | CKSONVILLE FL 32256 | | | | 33 | | | | | |
| JA | CKSONVILLE FL 32256 | | | | 93 84 City | | | | 85 Zip (| Code |
| | | 0502 and 601 | 7.1508, Ftorida Statu | 1 | 34 City | 1 corpor | ation submits this statement for the | FL purpose of c | 85 Zip (| |
| Pursuant to office or re agent. I an | | 0502 and 600 tate of Florida bligations of, | 7.1508, Florida Statu I Such change was Section 607.0505, Fl | 1 | 34 City | l corpor poration | ation submits this statement for the o's board of directors. I hereby acce | | | |
| Pursuant to office or re agent. I an | to the provisions of Sections 607. egistered agent, or both, in the S m familiar with, and accept the of Signifure typed or printed name of registered | | applicable (NO | ies, the ab authorized orida Statu E: Registored | 34 City ove-named by the cor les. | | when reinstating) | purpose of c opt the appoint | hanging it ntment as | s registered registered |
| Pursuant to office or re agent. I ar | to the provisions of Sections 607. egistered agent, or both, in the S m familiar with, and accept the of Signature typed or printed name of regesting OF FICE HS | d agent and take if | applicable (NO | ies, the ab authorized orida Statu E: Registored 13. 1.1 JRL | 34 City ove-named by the cor los. Agent signature | e required | when reinstating) ADDITIONS/CHANGES TO OFF | DATE CERS AND C | hanging it niment as DIRECTOR | s registered registered |
| Pursuant to office or re agent. I ar NATURE | to the provisions of Sections 607. egistered agent, or both, in the S m familiar with, and accept the of Stanture typed or printed name of registere OFFICERS ST PURCELL, CARLENA E 10475-110 FORTUNE PKN | d egent and tilk if AND DIRECT | applicable (NO) ORS | ies, the ab authorized orida Statu E: Registored 13. 1.1 JRL | 34 City ove-named by the cor los. Agent signature | e required | when reinstating) ADDITIONS/CHANGES TO OFF | DATE CERS AND C | hanging it niment as DIRECTOR | s registered registered S IN 12 |
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