5-9-97 B- 6847 FILE NOW: FILING FEE AFTER M

PROFIT CORPORATION annual report

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

SIGNATURE

DOCUMENT # 474345

(6)

MEDIA DESIGN GROUP, INCORPORATED

Principal Place of Business Mailing Address											
•		<u> </u>	Mailing Address 1133 MORSE BOULEVARD WINTER PARK FL 32789-3743			1 100111 01011 12011 011000 11111	*****				
1133 MORSE E WINTER PARK		WINTER PARK FL 327									
						3. Date Incorporated or Qu	alified	3a. Date of L	,	oort	
	· · · · · · · · · · · · · · · · · · ·					04/21/1975 4. FEI Number		05/01/18			
— ·	ace of Business	2a. Mailing Address							_	lied For	
Suite, Apt.	# etc	26 Suite, Apt. #, etc.				59-1646436		_ 60		Applicable	
22	π, ειτ.	27					ired	d S8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Finar		\$5	.00 M	lay Be	
23		28				Trust Fund Contribution		<u> </u>	ded to	Fees	
Zip 24	Country	Z(p	Country 30			4	B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
24	9. Name and Address of Curren		130	Τ		10. Name and Address of					
WA1	ISON,LAWRENCE M.JR.			81	Name		<u>*</u> _				
	1 FOREST AVENUE		82 Street			Address (P.O. Box Number is Not A	Idress (P.O. Box Number is Not Acceptable)				
	TER PARK FL 32789										
				63							
				84	City	······································		FL 85	Zip Co	ode	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	itutes, the a	Ll	-named	corporation submits this statement	for the pu	rpose of chance	ing its	registered	
office or re agent. La	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was stions of, Section 607,0505.	as authorize Florida Sta	d by	the corp	poration's board of directors. I heret	y accept	the appointme	nt as re	epistered:	
SIGNATURE		•									
	Signature, typical or purified name of registered age			od Age	nt signatura	required when reinstating)		DATE			
12. THLE		OFFICE RS AND DIRECTORS STD DELETE		13. 1.1 TITLE		ADDITIONS/CHANGES TO	J OFFICE	HS AND DIME	****	Addition	
NAME	HUESCA, KAREN W	OLLEIC	1.2 N					<u> </u>	niAc		
STREET ADDRESS	324 WOODSTEAD CRCL.				address :						
CITY - ST - ZIP	LONGWOOD, FL 00000			1.4 CITY-ST-ZIP			-				
TITLE	VD	DELETE	2.1 1					Ch	ange	Addition	
NAME	SLACK, JOHN D		2.2 N							Ì	
STREET ADDRESS	531 GRANADA WAY		2.3		ADDRESS						
CITY-ST ZIP	LONGWOOD, FL 00000		2 4	2 4 CITY-ST-ZIP							
BILE	D	_		31 TITLE				Ch	ange	Addition	
NAME	WATSON, LAWRENCE M, JR		321								
STREET ADDRESS	1621 FOREST AVENUE				ADDRESS						
CHTY - S1 - ZHF	WINTER PARK, FL 00000			34. C(TY-ST-ZIP				TT 06		T Addition	
TITLE	PD AARTUOAN	☐ DELETE						∐ Ch	ange	☐ Addition	
NAME CANCEL ADDRESS OF	A THE STATE OF STATE			4. 2 NAME 4.3 STREET ADDRESS							
STREET ADDRESS	LONGWOOD, FL 00000		-							ŀ	
CITY-ST ZIP TITLE	LUNGHOUD, FL WWW	DELETE	4.4 City 5.1 Title		1-111			☐ Ch	ange	Addition	
NAMÉ				5.2 NAME							
STREET ADDRESS					address	,					
CHY-SI-ZIP				5.4 CITY - ST - ZIP							
TITLE		DELETE		TITLE	, 4-11			Ch Ch	ange	Addition	
NAME		_ ·	1	VAME	,				-	-	
CTOCC LABORROS					ADDRECC						

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), Fiorida 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 or an attachment with an address.

4/30/97