Applied For

Not Applicable \$8.75 Additional

□No

Fee Required

**\$5.00** May Be

Added to Fees

## 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

## DOCUMENT # 519721

1. Corporation Name

City & State

23

24

PAGE & ASSOCIATES ADVERTISING & DIRECT MARKETING

INC.		
Principal Place of Business	Mailing Address	
743 GANTT AVE. SARASOTA FL 34232	743 GANTT AVE. SARASOTA FL 34232	
Principal Place of Business 1	2a. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

27

28

City & State

Zip

29 25 9. Name and Address of Current Registered Agent

Country

PAGE,	RICH	IAR	D J.
743 GA	MTT	A۷	E
SARAS	OTA	FL	34232

## **FILED** Mar 04, 1999 8:00 am **Secretary of State**

03-04-1999 90005 044 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

Street Address (P.O. Box Number is Not Acceptable)

12/06/1976

4. FEI Number 59-1706805

Sarasota FL 34232		83	_					
			84	City	FL	85	Zip Co	ode
office or re	to the provisions of Sections 607.0502 and 607. egistered agent, or both, in the State of Florida. m familiar with, and accept the obligations of, Se	Such change was au	thorized by	the corpora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoi	changi ntment	ng its regi	egistered stered
SIGNATURE	Signature, typed or printed name of registered agent and title if ap	olicable. (NOTE: I	Registered Agei	nt signature regu	erred when reinstating) DATE			
12.	OFFICERS AND DIRECT		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIR	ECTOR	S IN 12
TITLE	PVT	☐ DELETE	1.1 TITLE			Ch	ange	☐ Addition
NAME	PAGE, RICHARD J		12 NAME	}	·			
STREET ADDRESS	743 GANTT AVE		1.3 STREE	ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34232		1.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	2.1 TITLE		,	Ch	ange	☐ Addition
NAME			2.2 NAME	ļ				
STREET ADDRESS			2.3 STREE	FADDRESS				
CITY-ST-ZIP			2.4 CITY-S	T-21P	والغلب يتبعدوا والدائية			
TITLE		□ DELETE	3.1 TITLE			Ch	ange	Addition
NAME			32 NAME	ŀ				
STREET ADDRESS			3 3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-5	T-ZIP				_
TITLE		☐ DELETE	4.1 TITLE			☐ Ch	ange	Addition Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP	i		4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Ch	ange	Addition Addition
NAME			5.2 NAME		•			
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP	_		5.4 CITY-S	T-ZIP				_
TITLE		☐ DELETE	6.1 TITLE			Ch	ang <del>e</del>	Addition
NAME			6.2 NAME		•			
STREET ADDRESS			6.3 STREE	TADORESS				
CITY-ST-ZIP			6.4 CITY-S					_
14. I hereby o	certify that the information supplied with this filing	does not qualify for	the exempt	ion stated in	Section 119.07(3)(i), Florida Statutes. I further cer	tify that	the int	ormation

Country

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indicated on this annual report or ed officer or director of the corporation Block 12 or Block 13 if changed, or strue/and accurate and that my signature shall have the same legal/effect as it made under oath, that it aim at Imposvered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: