FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 539799

(7)

CEW PUBLICATIONS, INC.



Principal Place of Business Mailing Address								
					***************************************	· · · · · · · · · · · · · · · · · · ·		
140 49TH ST S 140 49TH ST S ST PETERSBURG FL 33707 ST PETERSBURG FL 33707								
				3. Date Incorporated or Qualified 07/21/1977		d 3a. Date of Last Report 05/23/1995		
2. Principal Pla 21	ace of Business	2a. Mailing Address			4. FEI Number 59-1748846		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		8.75 Additional Fee Required	
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country 24 25 29		Zip	·1		This corporation has liability for intangible tax under s 199 032, Florida Statutes ☐ Yes ☐ No			
	Name and Address of Currer	nt Registered Agent			10. Name and Address of New	Registered Age	ent	
			8	Name				
WATSON, JOHN E. 146 49TH ST. SOUTH			8:	82 Street Address (P.O. Box Number is Not Acceptable)				
	RSBURG FL 33711		83				V-11/12 11 11 11 11 11 11 11 11 11 11 11 11 1	
ı			84	City		FL	35 Zip Code	
SIGNATURE . 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D WATSON, JOHN E 140 49TH ST S ST PETERSBURG, FL 00000	D DIRECTORS DELETE	13. 1 TITLE 1.2 NAME	I ADDRESS	ADDITIONS/CHANGES TO OF		RECTORS IN 12 Change Addition	
TITLE NAME STREET ADDRESS C-TY-ST-ZIP	CP WRAY, C E 140 49TH ST S ST PETERSBURG, FL 00000	☐ DELETE	2 1 THE 2 2 NAME	I ADDRESS			nange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BURDICK, NORMAN L 140 49TH ST S ST PETERSBURG, FL 00000	DELETE	3 4 TITLE 32 NAME 33 STH: 34 CITY	EL ADDRESS			Change Addition	
TITLE NAME STREET ADDRESS	STD Wray, Joanne L 140 49th St S St Petersburg, FL 00000	□ DELETE T	4 1 TITLE 4.2 NAME 4.3 STREE	L ADDRESS	· · · · · · · · · · · · · · · · · · ·		hange 🔲 Addition	
TITLE NAME STREET ADDRESS	O, TETERIODURA, TE 00000	□ DELETE		I ADDRESS			Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5 4 CHY- 6 1 THEE 6 2 NAME 6 3 STREE 6 4 CHY-	I ADDRESS			nange Addition	

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 legal effect as if made under oath; that I am an officer or clirector 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON SUBSCION

5/15/96 813-323-3023