

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2006 8:00 am**  
**Secretary of State**

05-05-2006 90190 003 \*\*\*150.00

**DOCUMENT # 556887**

1. Entity Name  
**LAKE WORTH HERALD PRESS, INC.**



Principal Place of Business  
130 SOUTH H STREET  
PO BOX 191  
LAKE WORTH, FL 33460

Mailing Address  
130 SOUTH H STREET  
PO BOX 191  
LAKE WORTH, FL 33460

**50019198**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04252006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

59-1810916

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIMS, H. BRYANT  
7301 S. DIXIE HWY  
WEST PALM BEACH, FL 33405

Name Daniel L. Monahan

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

101 South J Street

City Lake Worth

FL

Zip Code 33460

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DANIEL L. MONAHAN

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/06

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME EASTON, MARK J  
STREET ADDRESS 130 SOUTH H STREET  
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE VD ☐ Delete  
NAME EASTON, BRUCE H  
STREET ADDRESS 130 SOUTH H STREET  
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE ST ☐ Delete  
NAME EASTON, SARA JO  
STREET ADDRESS 130 S. H STREET  
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Mark J Easton*

Mark J Easton

4.25.6

561-585-9387