

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700218

1. Entity Name

SPANISH PUBLICATIONS, INC.

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90051 007 ****61.25

0088314

Principal Place of Business

20975 SWENSON DR
STE 125
WAUKESHA WI 53186-4064
US

Mailing Address

20975 SWENSON DR.
SUITE 125
WAUKESHA WI 53186-4064
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6175128

Applied For

Not Applicable

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

SHEDD, HUDSON REV

~~1200 AURORA BLVD, #C227~~ 12311 12th Avenue East
BRADENTON FL 34202 - 2793

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	WALKER, WILLIAM H., MRS.	
STREET ADDRESS	5369 HIGHWAY ZC	
CITY-ST-ZIP	DOUSMAN WI 53118	
TITLE	D	<input type="checkbox"/> Delete
NAME	ELLIOTT, PAUL	
STREET ADDRESS	5718 BENT CREEK TRAIL	
CITY-ST-ZIP	DALLAS-TX-75252	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LINCOLN, FRANK J	
STREET ADDRESS	207 HEMLOCK DR.	
CITY-ST-ZIP	RICHARDSON TX 75081-3908	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZEMAN, CHARLES	
STREET ADDRESS	P O BOX 684 N/A	
CITY-ST-ZIP	INTERCESSION CITY FL 33848	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHEDD, HUDSON	
STREET ADDRESS	1200 AURORA BLVD, #C227	
CITY-ST-ZIP	BRADENTON FL 34202	
TITLE	C	<input type="checkbox"/> Delete
NAME	WALKER, STEPHEN	
STREET ADDRESS	20975 SWENSON DR., STE 125	
CITY-ST-ZIP	WAUKESHA WK 53186	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	P O BOX 1086 (No Street Address)
CITY-ST-ZIP	KILGORE, TX 75663
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	12311 12th Avenue East
CITY-ST-ZIP	Bradenton, FL 34202-2793
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	WAUKESHA, WI 53186-4064

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 10, 2001 262-798-5255

Date

Daytime Phone #

CR2E037 (10/00)