DOCU 1. Entity Nan	MENT # 723936	FILED Jun 02, 2003 8:00 am Secretary of State 06-02-2003 90186 007 ****61.25						
Principal Place of Business 513 E UNIVERSITY AVE GAINESVILLE FL 32601-5451 US		Mailing Address 513 E UNIVERSITY AVE GAINESVILLE FL 32601-5451 US			letta tasan teta asit dest stati stati	I AND AND AND AND AND		
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & State		City & State		4. FEI Number 23-7225382 Applied For]	
Zip	Country	Zip	Country	5. Certificate of Statu		Not Applicable 5 Additional	1	
	6. Name and Address of Current Re	gistered Agent				equired	}	
			Name	Name				
MAHON, JOHN K 4129 SW 2ND AVE			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
GAINESV	ILLE FL 32607						-	
			City		FL ²	o Code		
· · · · · · · · · · · · · · · · · · ·	Stgnature, typed or printed name of registered agent and FILE NOW: FEE IS \$61,25		E: Registered Agent signature require	sd when reinstating) \$5.00 May Be Added to Fees	DATE Make Check Pay Florida Departmen			
10.	OFFICERS AND DIRE	CTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTO	RS IN 10	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DAVIS, DON L 150 SW FAIRWAY DR KEYSTONE HEIGHTS FL 32656	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		C1	nange 🗌 Addition	CR2E037 (10/02)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, BURNHAM 16718 NW 40TH PL NEWBERRY FL 32669	Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		CH	nange Addition	CR2	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SMITH,`ROBERT 3809 S.W. 37TH ST. GAINESVILLE FL 32608	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		CI	nange 🗌 Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAHON, JOHN K 4129 SW 2 AVE GAINESVILLE FL 32607	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		CI	nange 🗌 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PICKARD, JOHN B 406 N.E. 7TH AVE. GAINESVILLE FL 32601	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Cr	hange Addition	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANTHAM, SUSAN 215 SW 40TH TERR GAINESVILLE FL 32607	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Ct	ange 🗌 Addition	•	
indicated of the cor	certify that the information supplied with th on this report or supplemental report is tru- poration or the receiver or trustee empowe or on an attachment with an address, with URE:	ue and accurate and that me ered to execute this report and all other like empowered.	ny signature shall have the as required by Chapter 61	same legal effect as if m 7, Florida Statutes; and th	ade under oath; that I am an o nat my name appears in Block	officer or director		

Attachment 723936

90138244

ATTACHMENT 2003 UNIFORM BUSINESS REPORT THE ALACHUA PRESS, INC. 723936

ITEM 11 (CONTINUED): OFFICERS AND DIRECTORS

TITLEDNAMEDAVIS, KENNETH S.ADDRESS1901 S.MARIONCITY-ST-ZIPLAKE CITY, FL 32056-1809

TITLEDNAMEBREDAHL, CARLADDRESS515 N.E. 9TH AVENUECITY-ST-ZIP GAINESVILLE, FL 32601

TITLEDNAMEJONES, RAYADDRESS4100 NW 28TH LANE, APT. 54CITY-ST-ZIPGAINESVILLE, FL 32606

TITLE

NAME SID DOBRIN ADDRESS 6507 NW 31ST TERRACE CITY-ST-ZIP GAINESVILLE, FL 32653

D