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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 14 AM 7:55

DOCUMENT # 840215 (8)

1. Corporation Name
PALMER COMMUNICATIONS INCORPORATED

Principal Place of Business	Mailing Address
12800 UNIVERSITY DR STE 500 FT MYERS FL 33907	12800 UNIVERSITY DR STE 500 FT MYERS FL 33907

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/15/1978
3a. Date of Last Report: 05/01/1994
4. FEI Number: 42-0173900 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25
2a. Mailing Address 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WISEHART, M. WAYNE
12800 UNIVERSITY DRIVE
SUITE 500
FT. MYERS FL 33907

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____ Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	1 1 TITLE ☐ Change ☐ Addition
NAME	HARTER, ROBERT H	1 2 NAME
STREET ADDRESS	3930 GRAND AVE # 202	1 3 STREET ADDRESS
CITY-ST-ZIP	DES MOINES IA	1 4 CITY-ST-ZIP
TITLE	PD	2 1 TITLE ☐ Change ☐ Addition
NAME	RYAN, WILLIAM J	2 2 NAME
STREET ADDRESS	8111 BAY COLONY DR #801	2 3 STREET ADDRESS
CITY-ST-ZIP	NAPLES FL	2 4 CITY-ST-ZIP
TITLE	VDS	3 1 TITLE ☐ Change ☐ Addition
NAME	ENGELHARDT, ROBERT G	3 2 NAME
STREET ADDRESS	11430 MAHOGANY RUN	3 3 STREET ADDRESS
CITY-ST-ZIP	FT MYERS FL	3 4 CITY-ST-ZIP
TITLE	VTD	4 1 TITLE ☐ Change ☐ Addition
NAME	WISEHART, M. WAYNE	4 2 NAME
STREET ADDRESS	15348 FIDDLESTICKS BLVD	4 3 STREET ADDRESS
CITY-ST-ZIP	FT MYERS FL	4 4 CITY-ST-ZIP
TITLE	VD	5 1 TITLE ☐ Change ☐ Addition
NAME	MCCLOSKEY, BONNIE P.	5 2 NAME
STREET ADDRESS	730 EAST DURANT	5 3 STREET ADDRESS
CITY-ST-ZIP	ASPEN CO	5 4 CITY-ST-ZIP
TITLE	VD	6 1 TITLE ☐ Change ☐ Addition
NAME	SUTTON, JENNY W.	6 2 NAME
STREET ADDRESS	4080 CUTLASS LANE	6 3 STREET ADDRESS
CITY-ST-ZIP	NAPLES FL	6 4 CITY-ST-ZIP

14. I do 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)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gordon A. McCollum — 3/1/95 — 515-242-3776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
GORDON A. McCOLLUM, VICE PRESIDENT

003194 CP