2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2008 8:00 am
Secretary of State
01-31-2008 90012 029 ***158.75

DOCUMENT # 842194

1. Entity Name
MEDIA-PAC, INC.

Principal Place of Business	Mailing Address
8660-150 COLLEGE PARKWAY FORT MYERS FL 33919	8660-150 COLLEGE PARKWAY FORT MYERS FL 33919

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
12065 METRO PARKWAY	12065 METRO PARKWAY,
Suite, Apt. #, etc.: 203	Suite, Apt. #, etc.: 203
City & State: FORT MYERS	City & State: FORT MYERS
Zip: 33966 Country: LEE	Zip: 33966 Country: LEE

4. FEI Number: 41-1315219 ☐ 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
LIPPOLD, F LEWIS 8660-150 COLLEGE PKWY FT MYERS FL 33919	Name: ANN LIPPOLD Street Address (P.O. Box Number is Not Acceptable): 12065 METRO PARKWAY SUITE 203 City: FORT MYERS FL Zip Code: 33966

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] ANN E. LIPPOLD 1-25-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when submitting) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ISAACSON, KENNETH L 101 8TH AVE N BOX 406 ST JAMES MN	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LIPPOLD, F LEWIS 1043 CARELLEN DR FORT MYERS FL	☒ Delete		☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD LIPPOLD, ANN E. 1043 CLARELLEN DRIVE FORT MYERS FL	☐ Delete	TITLE PVTD LIPPOLD, ANN E. 1043 CLARELLEN DRIVE FORT MYERS, FLA 33919	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: [signature] 1-25-08 239 481 3080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #