

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tandy H. Newton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 21 PM 2:50

DOCUMENT # 849436 (1)
1. Corporation Name
FAIRBANKS COMMUNICATIONS, INC.

Principal Place of Business Mailing Address
1601 BELVEDERE RD STE 202 E. 1601 BELVEDERE RD STE 202 E.
WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/15/1981 3a. Date of Last Report 03/08/1994

4. FEI Number 35-1512509 Applied For Not Applicable

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

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

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE V
NAME SNOWDON, ROGER S
STREET ADDRESS 1601 BELVEDERE #202 E
CITY- ST- ZIP W. PALM BCH. FL
TITLE S
NAME BETLEY, LEONARD J
STREET ADDRESS 9292 N MERIDIAN ST #304
CITY- ST- ZIP INDIANPOLIS, IND 0
TITLE VD
NAME FAIRBANKS, VIRGINIA B
STREET ADDRESS 1601 BELVEDERE RD #202E
CITY- ST- ZIP W. PALM BCH. FL
TITLE PD
NAME FAIRBANKS, R M
STREET ADDRESS 1601 BELVEDERE RD #202E
CITY- ST- ZIP W. PALM BCH. FL
TITLE T
NAME FAIRBANKS, RICHARD M
STREET ADDRESS 1601 BELVEDERE RD #202E
CITY- ST- ZIP W. PALM BCH. FL
TITLE EVP
NAME HILLIARD, JAMES C.
STREET ADDRESS 1601 BELVEDERE ROAD, #202E
CITY- ST- ZIP WEST PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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)(k), 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 as an attachment with an address.

SIGNATURE: [Signature] 3-1-95 407-838-4370
SIGNATURE AND TYPO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Day/Year) (Phone #)