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

26

City & State

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 852644 **DOCUMENT #** 

(4)

Principal Place of Business

U S HIGHWAY 82 EAST P O BOX 1007 TIFTON GA 31794

2. Principal Place of Business

Suite, Apt. #, etc.

21

22

L-D ADVERTISING COMPANY, INC.

Mailing Address					
U S HIGHWAY 82 EAST P O BOX 1007					
TIFTON GA 31794	<ol> <li>Date Incorporated or Qualified</li> <li>04/21/1982</li> </ol>	3a. Date of Last Report 03/22/1995			
	4. FEI Number	Applied Fo	Dr.		
2a. Mailing Address	58-0833041	Not Applic	cable		
Suite. Apt. #, etc	5. Certificate of Status Desired	\$8.75 Addition			

City & State Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s 199.032, 23 Country 210 Zφ Yes No Florida Statutes 30 29 24 9. Name and Address of Current Registered Agent

LINDSEY, W. F. 901 LIVE OAK PLANTATION RD. TALLAHASSEE FL 32312

	10. Name and Address of New Registered Agent								
81	Name								
82	Street Address (P.O. Box Number is Not Acceptable)								
83									
84	City		85	Zip Code					

6. Election Campaign Financing

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.

2.	gnature, typed or pricted name of registered agost and the if a OFFICERS AND DIREC	TORS	13.	ADDITIONS/CHANGES TO OF	Change	Addition
ruf	PD	DELETE	1 1 TIFLE		Cua ige	
IME .	LINDSEY, BOBBY		12 NAME			
REET ADDRESS	MELBA DR.		1.3 SEREET ADDRESS			
TY-ST-ZIP	TIFTON GA		1.4 CITY - ST - ZIP		Change	Addition
LE	VD	☐ DELETE	2 1 TITLE	_	[EF Sharige	
LMÉ	DENBY, RHEUDEAN		2 7 NAME	Delete		
REET ADDRESS	704 E. 8TH ST.		23 STREET ADDRESS	* letel		
TY-ST-ZIP	TIFTON GA		2.4 CITY - ST - ZIP		Change	☐ Add tier
TLE	D	DELETE	3 1 THEE		☐ Onlange	
AME I	LINDSEY, W. F.		3.2 NAME			
REEL ADDRESS	901 LIVE OAK PLANTATION		3.3 STREET ADDRESS			
TY - ST - ZIP	TALLAHASSEE FL		3.4.C(TY - ST - Z(P)		Change	Addition
TLE	D	☐ DELETÉ	4 1 TITLE		Grange	
AME	LINDSEY, W. F., MRS.		4.2 NAME			
TREET ADDRESS	901 LIVE OAK PLANTATION		4.3 STREET ADDRESS			
ITY - ST - ZIP	TALLAHASSEE FL		4.4 CITY - ST - ZIP		☐ Change	☐ Additio
TLE	ST	DELETE	5 1 TITLE		☐ Change	
IAME	MCCALL, W. A.		5.2 NAME			
STREET ADDRESS	2201 MEADOWBROOK DR.		5 3 STHEET ADDRESS			
CITY - ST-ZIP	TIFTON GA		5.4 CiTY - \$1 - Zif*		Change	Additio
TITLE		☐ DELETE	6 1 TITLE		CT Change	
NAME			6.2 NAME			
			63 STREET ADDRESS			
STREET ADDRESS DITY+ST-ZIP			6 4 C(1) Y - ST - Z(P	for the exemption stated in Section 1	40 07/9/44 Florida Stat	utoc I further

14. Ido hereby certify that the information supplied with this fling 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 certify that I am an officer or director of the corporation or the receiver or trusted 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.

W. A. M. Call
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M.S. A. M. Call

\$5.00 May Be