FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996

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

DOCUMENT # **F34198** **(4)**

1. Corporation Name
HUBBARD COMMUNICATIONS, INC.

Principal Place of Business
9675 4TH STREET NORTH
ST. PETERSBURG FL 33702

Mailing Address
3415 UNIVERSITY AVE. W
SAINT PAUL MN 55114-1019

3. Date Incorporated or Qualified: 04/30/1981
3a. Date of Last Report: 01/31/1995

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

4. FEI Number: 93-0792081 — 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

9. Name and Address of Current Registered Agent
ORGERA, GEORGE
9675 4TH ST N
ST PETERSBURG FL 33702

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 of a corporate officer or director) (Note: If a new registered agent is appointed, the registered agent must sign here.) DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	HUBBARD, STANLEY S	
STREET ADDRESS	3415 UNIVERSITY AVE	
CITY, ST, ZIP	ST PAUL MN 55114	
TITLE	T	☐ DELETE
NAME	DEENEY, GERALD D	
STREET ADDRESS	3415 UNIVERSITY AVENUE	
CITY, ST, ZIP	ST. PAUL MN	
TITLE	PD	☐ DELETE
NAME	ORGERA, GEORGE	
STREET ADDRESS	9675 FOURTH ST N	
CITY, ST, ZIP	ST PETERSBURG, FL 00000	
TITLE	S	☐ DELETE
NAME	ROMINSKI, KATHRYN H.	
STREET ADDRESS	3415 UNIVERSITY AVE.	
CITY, ST, ZIP	ST. PAUL MN	
TITLE	D	☐ DELETE
NAME	HUBBARD, KAREN	
STREET ADDRESS	3415 UNIVERSITY AVE.	
CITY, ST, ZIP	ST. PAUL MN	
TITLE	CD	☐ DELETE
NAME	HUBBARD, STANLEY E II	
STREET ADDRESS	3415 UNIVERSITY AVE	
CITY, ST, ZIP	ST PAUL MN 55114	

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 on an attachment with an address.

SIGNATURE: Gerald D Deeney 1/17/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)