

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 09 1997 8:00am
Secretary of State

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

ORGERA, GEORGE
9675 4TH ST N
ST PETERSBURG FL 33702

3. Date Incorporated or Qualified

04/30/1981

3a. Date of Last Report

01/26/1996

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

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

TITLE ☐ DELETE

NAME
HUBBARD, STANLEY S
STREET ADDRESS
3415 UNIVERSITY AVE
CITY-ST-ZIP
ST PAUL MN 55114

TITLE ☐ DELETE

NAME
DEENEY, GERALD D
STREET ADDRESS
3415 UNIVERSITY AVENUE
CITY-ST-ZIP
ST. PAUL MN

TITLE ☐ DELETE

NAME
ORGERA, GEORGE
STREET ADDRESS
9675 FOURTH ST N
CITY-ST-ZIP
ST PETERSBURG, FL 00000

TITLE ☐ DELETE

NAME
ROMINSKI, KATHRYN H.
STREET ADDRESS
3415 UNIVERSITY AVE.
CITY-ST-ZIP
ST. PAUL MN

TITLE ☐ DELETE

NAME
HUBBARD, KAREN
STREET ADDRESS
3415 UNIVERSITY AVE.
CITY-ST-ZIP
ST. PAUL MN

TITLE ☐ 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

1.1 NAME

1.1 STREET ADDRESS

1.1 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.1 NAME

2.1 STREET ADDRESS

2.1 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.1 NAME

3.1 STREET ADDRESS

3.1 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.1 NAME

4.1 STREET ADDRESS

4.1 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.1 NAME

5.1 STREET ADDRESS

5.1 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.1 NAME

6.1 STREET ADDRESS

6.1 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 12 if changed, or on an attachment with an address.

SIGNATURE:

612-642-4300 4/29/97

CR2E034 (9/96)