## **2000 UNIFORM BUSINESS REPORT (UBR)**

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SIGNATURE:

## **DOCUMENT # F51490** Apr 28, 2000 8:00 am Secretary of State 1. Entity Name DIOCESAN PUBLICATIONS, INC. 04-28-2000 90033 027 \*\*\*150.00 Principal Place of Business Mailing Address 2000 ALDEN RD 2000 ALDEN RD ORLANDO FL 32803-1459 ORLANDO FL 32803-1459 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State FEI Number 59-2199978 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZIELKE, ROBERT A SR Street Address (P.O. Box Number is Not Acceptable) 2000 ALDEN ROAD ORLANDO FL 32803 Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Electión Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PD TITLE ☐ Change ☐ Addition TITLE ☐ Delete GALANT, CARL J. NAME NAME 8416 N INTERREG HWY IH35 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **AUSTIN TX** ☐ Addition VC. **X** Change TITI F ☐ Delete TITLE ZIELKE, ROBERT A. SR. 1700 S. OCEAN BLUD. 7B ZIELKE, ROBERT A SR. ADDRUG NAME 6690-N.W. 67TH-PLACE STREET ADDRESS STREET ADDRESS POMPANO BEACH FL. 33062 CITY-ST-7IP CITY-ST-ZIP PARKLAND FL Change ☐ Addition ☐ Delete TITL F ZIELKE, ROBERT A. JR. NAME STREET ADDRESS 1256 ALEXANDRIA CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 ☐ Change ☐ Addition TITLE TITLE ☐ Delete ARSULOWICZ, CARLA A. NAME NAME 8572 BUTTERNUT BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 report or supplied that it 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 receive or trusted embowered to secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

04-20-00 (407)89

AECTOR OBERT A. ZIELKE, JR. Days