FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 MAY 18 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # **F66005** **(2)**

1. Corporation Name
CROWN HERALD, INC.

Principal Place of Business	Mailing Address
5905 JOHNS RD TAMPA FL 33634 US	5905 JOHNS RD P.O. BOX 24386 TAMPA FL 33623-1386

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/02/1982
3a. Date of Last Report: 04/08/1994

2. Principal Place of Business
21 6308 Benjamin Rd
22 Suite, Apt. #, etc. Ste. 708
23 City & State: Tampa FL
24 Zip: 33634 25 Country: USA

2a. Mailing Address
26 P.O. Box 24386
27 Suite, Apt. #, etc.
28 City & State: Tampa FL
29 Zip: 33623-4386 30 Country: USA

4. FEI Number: 59-2164694 ☐ 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

PARCHER, TIM
5905 JOHNS RD
TAMPA FL 33634

10. Name and Address of New Registered Agent

81 Name: Eric Mitchell
82 Street Address (P.O. Box Number is Not Acceptable): 6308 Benjamin Rd. Ste. 708
83
84 City: Tampa FL 85 Zip Code: 33634

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: E. Mitchell — Eric Mitchell, President — May 15, 1995
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, STEN K.	12 NAME	
STREET ADDRESS	S. PROMENADEN 69	13 STREET ADDRESS	
CITY-ST-ZIP	MALMOE, SWEDEN	14 CITY-ST-ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	SWENSSON, PETER	22 NAME	
STREET ADDRESS	S. PROMENADEN 69	23 STREET ADDRESS	
CITY-ST-ZIP	MALMOE, SWEDEN	24 CITY-ST-ZIP	
TITLE	P	31 TITLE	P ☒ Change ☐ Addition
NAME	PARCHER, TIM	32 NAME	Mitchell, Eric
STREET ADDRESS	5905 JOHNS RD	33 STREET ADDRESS	6308 Benjamin Rd. Ste. 708
CITY-ST-ZIP	TAMPA FL	34 CITY-ST-ZIP	Tampa FL 33634
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	RC

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)(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 13 if changed, or added, or attachment with an address.

SIGNATURE: E. Mitchell — Eric Mitchell April 19, 1995 (813) 886-9007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

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