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Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F81690 (2)
 1. Corporation Name: **DGM PUBLISHING, INC.**

Principal Place of Business: **33 Lakeview Drive Mary Esther, Fl. 32569**
 Mailing Address: **P. O. Box 101 Mary Esther, Fl. 32569**

DO NOT WRITE IN THIS SPACE

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business		2a. Mailing Address		2b. Mailing Address		2c. Mailing Address		2d. Mailing Address	
Suite, Apt. #, etc.		City & State		City & State		City & State		City & State	
Zip		Country		City & State		City & State		City & State	
32569		Fl.		Mary Esther, Fl.		Mary Esther, Fl.		Okaloosa	

3. Date Incorporated or Qualified	4. FEI Number	Applied For
May 14, 1982	59-2194613	Not Applicable
5. Certificate of Status Desired	6. Election Campaign Financing Trust Fund Contribution	7. Additional Fee Required
<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$8.75 Additional Fee Required
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Coleman, Obe D. (deceased)	Virginia K. Coleman

9. Name and Address of Current Registered Agent
Coleman, Obe D. (deceased)

10. Name and Address of New Registered Agent
 81 Name: **Virginia K. Coleman**
 82 Street Address (P.O. Box Number is Not Acceptable): **33 Lakeview Drive**
 83
 84 City: **Mary Esther** FL 85 Zip Code: **32569**

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.
 SIGNATURE: *Virginia K. Coleman* DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSTD	11 TITLE	PD
NAME	Virginia K. Coleman	12 NAME	Obe D. Coleman, (Deceased)
STREET ADDRESS	33 Lakeview Dr.	13 STREET ADDRESS	
CITY-ST-ZIP	Mary Esther, Fl. 32569	14 CITY-ST-ZIP	
TITLE		15 TITLE	
NAME		16 NAME	
STREET ADDRESS		17 STREET ADDRESS	
CITY-ST-ZIP		18 CITY-ST-ZIP	
TITLE		19 TITLE	
NAME		20 NAME	
STREET ADDRESS		21 STREET ADDRESS	
CITY-ST-ZIP		22 CITY-ST-ZIP	
TITLE		23 TITLE	
NAME		24 NAME	
STREET ADDRESS		25 STREET ADDRESS	
CITY-ST-ZIP		26 CITY-ST-ZIP	
TITLE		27 TITLE	
NAME		28 NAME	
STREET ADDRESS		29 STREET ADDRESS	
CITY-ST-ZIP		30 CITY-ST-ZIP	

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 ***158.75

Handwritten signature

14. I hereby certify that the information supplied with this filing is true and correct for the information stated in Section 19.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report is complete, true, correct 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 this corporation or the principal officer or director employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13. I changed or remain attached to the address.

SIGNATURE: *Virginia K. Coleman*
 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 20, 1998 (850) 243-1151

CR2E034 (10/97)