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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300004617 (7) ELDRIDGE PUBLISHING COMPANY, INC.					## ###################################
Principal Plac	ce of Business	Mailing Address		- I CONTROL OF CONTROL OF STATE CONTROL	II BERTA EILAF HIRIF HOOF HOOF
P.O. BOX 1595 P.O. BOX 1595					
VENICE FL 34284-1595 VENICE FL 34284-1595				DO NOT HIDITE IN THE	CDACE
1				DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	orace
				10/13/1993	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		31-0272040	Not Applicable
Suite, Apt	. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27			b. Certificate of Status Desired	Fee Required	
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible No
24	25 9. Name and Address of Curre	29 ent Registered Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	
VC	ORHIS, STEVE		81 Name		
ANA OFFICE OF				ress (P.O. Box Number is Not Acceptable)	
VENICE FL 34292			or Street Addi	ress (F.O. Box (autriber is 140) Acceptable)	
l '			83		
			84 City		85 Zip Code
				FL	. []
11. Pursuant office or	to the provisions of Sections 607,05 registered agent, or both, in the Stat	02 and 607.1508, Florida Stat u e of Florida, Such change was	tes, the above-named corp authorized by the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	f changing its registered
agent, I a	am familiar with, and accept the oblig	gations of, Section 607.0505, F	orida Statutes.	, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE	Signature, typed or printed name of registered ac	tout and tille ill applicable (NO	TE: Registered Agent signature requir	ired when reinstating) DATE	
12,		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	D DIRECTORS IN 12
TITLE	STD	☐ DELETÉ	1.1 TrTLE		Change Addition
NAME	VORHIS, STEVE		1.2 NAME		i
STREET ADDRESS	370 CENTER CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELET e	2.1 TITLE	•	Change Addition
NAME	VORHIS, NANCY		2.2 NAME		(
STREET ADDRESS	370 CENTER CT		2.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	VENICE FL	I DELETE	2 4 CITY-ST-ZIP		Character 1 4460
TITLE		☐ DELETE	3.1 TIFLE		L Change L Addition
NAME CTOSET ADODESCS			3.2 NAME		ļ
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ĺ
CITY-ST-ZIP			4.4 City-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		Ì
CITY-ST-ZIP			5.4 City-St-Zip		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 suppliemental 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:

SIGNATURE:

CITY-ST-ZIP

03/23/98

FILED

Mar 26 1998 8:00am

Secretary of State