

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005 8:00 am
Secretary of State

03-15-2005 90019 041 ***150.00

DOCUMENT # F94000006496	
1. Entity Name EDITORIAL ENTERPRISES CORPORATION	

Principal Place of Business P.O. BOX 1267 GAINESVILLE, FL 32602	Mailing Address P.O. BOX 1267 GAINESVILLE, FL 32602
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03122005 Chg-P CR2E034 (10/03)

4. FEI Number 59-2250744		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FREELAND, MARION E 1212 N.W. 12TH AVE. GAINESVILLE, FL 32601		Name Freeland, Marion E. Street Address (P.O. Box Number is Not Acceptable) 2707 N.W. 4th Avenue City Gainesville FL 32607	
Address change only			

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when relocating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD SHANKLIN, DOUGLAS R 1238 N.W. 18TH TER. GAINESVILLE, FL 32605 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP SHANKLIN, LEIGH D 222 PEARSON EAST #1506 CHICAGO, IL 60611 ☒ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP Shanklin, John Carter 3503B Bridle Path Austin, TX 78703 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP SHANKLIN, ELIZABETH 3142 QUEENBURY DRIVE LOS ANGELES, CA 90064 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD SHANKLIN, DOUGLAS R 1238 N.W. 18TH TER. GAINESVILLE, FL 32605 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D TRUEX, ELEANOR 1644 IDLEWILD LN. HOMEWOOD, IL 60430 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Douglas R. Shanklin President March 11, 2005 352/ 372-3671

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #