

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **G09523** (3)

1. Corporation Name
MARK ONE ADVERTISING, INC.



Principal Place of Business

206 N BEACH ST # 106
P.O. BOX 5444
DAYTONA BEACH FL 32118

Mailing Address

206 N BEACH ST # 106
P O BOX 2008
DAYTONA BEACH FL 32115
US

2. Principal Place of Business

21. **610 Dunlawton Avenue**

22. **Suite 1**

23. **Port Orange, FL**

24. **32127** 25. **USA**

2a. Mailing Address

26. **118 Flamingo Ave**

27. **Daytona Beach, FL**

28. **32118** 29. **USA**

3. Date Incorporated or Qualified 11/24/1982	3a. Date of Last Report 05/31/1995
4. FEI Number 59-2237194	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HANCOCK, MICHAEL
118 FLAMINGO AVE
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

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 _____ DATE _____

12. OFFICERS AND DIRECTORS		
12.1 TITLE	PD	<input type="checkbox"/> DELETE
12.2 NAME	HANCOCK, MARK T	
12.3 STREET ADDRESS	118 FLAMINGO AVE.	
12.4 CITY, ST, ZIP	DAYTONA BCH. FL	
12.5 TITLE		<input type="checkbox"/> DELETE
12.6 NAME		
12.7 STREET ADDRESS		<input type="checkbox"/> DELETE
12.8 CITY, ST, ZIP		
12.9 TITLE		<input type="checkbox"/> DELETE
12.10 NAME		
12.11 STREET ADDRESS		<input type="checkbox"/> DELETE
12.12 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
13.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY, ST, ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 TITLE		
13.6 NAME		
13.7 STREET ADDRESS		
13.8 CITY, ST, ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9 TITLE		
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY, ST, ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13 TITLE		
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY, ST, ZIP		

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)(k), 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 or changed, or on an attachment with an address.

SIGNATURE: Mark Hancock Mark Hancock 1/31/96 904-756-2405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)