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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G51865

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KEARNEY PUBLISHING CORPORATION

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May 14 1997 8:00am
Secretary of State

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	ace of Business	Mailing Address					ik Midni midii	Binit Ainet ains	
	RST DRIVE	C/O CLAY KEARNEY			•				
UITE 140 DI ANION EL	90010	P. O. 80X 691148	48		•				
DRLANDO FL \$2819 IS		US	ORLANDO FL 82969-1148 US		3. Date Incorporated or Qualified 08/01/1983		3a. Date of Last Report 04/18/1996		
2. Principal	Place of Business	2a. Mailing Address		*********		4. FEI Number		A	pplied For
<u> </u>		26				59-2316364			lot Applicat
Suite, Ap	t #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
		27			1	or Certificate of Status Desired	. W	Fee F	Required
City & Str	alo	City & State				6. Election Campaign Financing		\$5.00	May Be
· · · · · · · · · · · · · · · · · · ·		28	- 1 - 5			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cou	intry		8. This corporation has liability fo			s. 19 9.032
	25	29	30				Yes		
	9. Name and Address of Cu	ment negistered Agent		81	Name	10. Name and Address of New R	egistere	1 Agent	
	ARNEY, CLAY				Name				
	M SOUTH PARK PLACE			82	Street Addre	ess (P.O. Box Number is Not Accepta	able)		
OR	LANDO FL 32819						· · · · · · · · · · · · · · · · · · ·	·	
				83					
				84	City			85 Zip	Code
					•	oration submits this statement for the on's board of directors. I hereby according to the control of the contro	F	_	
		ad agent and title if applicable	(MOTE: Discretores	d Acces	t elanat ya can da	W when referration	DATE		
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4. I do hereby certify that the information supplied with this filing 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 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 AND TYPED OR P.

I PRINTED NAME OF SIGNING OFFICER OR DAY

da W. Kearny

4/30/97 351-157