

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 13, 2002 8:00 am**  
**Secretary of State**

03-13-2002 90106 020 \*\*\*150.00

DOCUMENT # **H24455**

1. Entity Name

**Lake City News Advertiser Inc**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**508 N. 1st St.**

3. Mailing Address

**same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Lake City Florida**

City & State

4. FEI Number

**59-2449811**

Applied For

Not Applicable

Zip

**32055**

Country

**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Terri Bass**

Street Address (P.O. Box Number is Not Acceptable)

**Rt 9 Box 2058**

City **Lake City**

**FL**

Zip Code **32024**

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.

SIGNATURE **Terri Dockery Bass Terri Dockery Bass**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**2-15-02**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Cle Dockery President Lake City FL 32024</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President Terri Bass Lake City FL 32024</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary Scott Dockery Middleberg FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Treasurer Amy Shwar Lake City FL 32024</b>
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IN THIS SPACE**

13. I 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Terri Dockery Bass**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-15-02**

Date

**386-752-8280**

Daytime Phone #

CR2E034B (12/01)