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

**PROFIT CORPORATION** ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H31681 (0)

SEACOAST COMMUNICATIONS GROUP INC.

Principal Place of Business Mailing Address				( 198161) (0(01 11)() (1010 81)() (0101 1010101 10101 10101 10101 10101 10101 10101 10101 10101 10101 10101 10101 10101 10101 10101 101010	t Alaif Alait 81811 Aint alas Bibli fabi
2719 S. PONTE VEDRA BLVD. PONTE VEDRA FL 32082 US		2719 S PONTE VEDRA BLVD PONTE VEDRA FL 32082 US		DO NOT WRITE  3. Date incorporated or Qualified	IN THIS SPACE
				11/27/1984	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-2474871	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.				\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	Zip	, '		8. This corporation owes or has paid the current year Intangible	
24 25	29	30		Personal Property Tax due June  10. Name and Address of New Re	
9. Name and Address of Curren	n Registered Agent	81	Name	ID. Hame and Address of New Ne	Aleteled Adelit
WHITE, GEORGE J.		[*]	Hame		
2719 \$ PONTE VEDRA BLVD.		82	Street Addr	ress (P.O. Box Number is Not Acceptab	le)
PONTE VEDRA FL 32082		83			
		84	City	i.	FI 85 Zip Code
11. Pursuant to the provisions of Sections 607.050	02 and 607,1508. Florida Stat	utes, the above	-named corr	poration submits this statement for the p	urnose of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	⊦of Horida. Such change wa	s authorized by	the corporat	tion's board of directors. I hereby accep	at the appointment as registered
SIGNATURE Signature, lyped or punied name of registered age	and and tale of needlestels. (A)	O1E Registered Ago	at significant	und urban reinstation)	DATE
12. OFFICERS AND DIRECTORS		13.	ii signatore requi	ADDITIONS/CHANGES TO OFFICE	
TITLE PD	DELETE	1.1 TITLE			Change Addition
NAME WHITE, GEORGE J., JR		1.2 NAME			
TREET ADDRESS 2719 S. PONTE VEDRA BLVD.		1.3 STREET	ADDRESS		
CITY-ST-ZIP PONTE VEDRA FL		14 CITY-SI	- ZIP		
TITLE ST					Change Addition
NAME JONES, JEAN W ELLIOTT	JONES, JEAN W ELLIOTT				•
STREET ADDRESS 12 ROSELAWN LANE		2 3 STHEET	ADDRESS		
CITY-ST-ZIP MALVERN PA			T - ZIP		
TITLE	☐ DELETE	31 THILE			Change Addition
NAME		3.2 NAME			
STREET ADDRESS		3 3 STHEET	Andress		
CITY-ST-ZIP		3.4. C(TY-S	r-zie		
TITLE	Delete				Change
NAME	DELETE	4 1 TITLF			Change Addition
STREET ADDRESS	☐ DELETE	4 2 NAME			☐ Change ☐ Addition
	☐ DÉLETE	4 2 NAME 4 3 STREET			☐ Change ☐ Addition
CITY-ST-ZIP		4 2 NAME 4 3 STREET 4.4 CITY-ST			
TITLE	☐ DELETE	4 2 NAME 4 3 STREET 4.4 CITY-ST 5.1 TITLE			Change Addition
TITLE NAME		4 2 NAME 43 STREET 4.4 CITY-S' 5.1 TITLE 52 NAME	- ZIP		
TITLE		4 2 NAME 4 3 STREET 4.4 CITY-ST 5.1 TITLE	- ZIP ADDRESS		

6.2 NAME

6.3 STREET ADDRESS

14. 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 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 if chapted, or on an attachment with an address.

**FILED** 

Feb 09 1998 8:00am

Secretary of State

- A DOMENDA ORBOG ALION BANKO BALBA ANDRE ALBA ORBOG BANKO BANKO ORBOT ORBOT BANKO BANKO