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

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State
04-26-1999 90155 017 ***150.00

DOCUMENT # H49663

1. Corporation Name

ADVENT MARKETING, INC.

Principal Place of Business	Mailing Address
1460 S.W. PRICE CHILD RD. ARCADIA FL 33821 US	PO BOX 700 ARCADIA FL 33821 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
03/29/1985

4. FEI Number
59-2507006

Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business	21		2a. Mailing Address	26
Suite, Apt. #, etc.	22		Suite, Apt. #, etc.	27
City & State	23		City & State	28
Zip	24	Country	25	Zip	29	Country	30

9. Name and Address of Current Registered Agent

JONES, GERALD J
1576 NW MYRTLE AVE
ARCADIA FL 33821

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 607.0502 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 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	12		13		Change	Addition
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	JONES, GERALD J		1.2 NAME			
STREET ADDRESS	1576 NW MYRTLE AVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	ARCADIA FL		1.4 CITY-ST-ZIP			
TITLE	DVP	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	BRODOWSKY, CHERYL LL		2.2 NAME			
STREET ADDRESS	1518 SE OHIO AVE		2.3 STREET ADDRESS			
CITY-ST-ZIP	ARCADIA FL		2.4 CITY-ST-ZIP			
TITLE	DCS	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	JONES, BETTY C		3.2 NAME			
STREET ADDRESS	1576 NW MYRTLE AVE		3.3 STREET ADDRESS			
CITY-ST-ZIP	ARCADIA FL		3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	Jones, James M, V.P. Marketing Killdeer Coon Rapids, MN	☐ Change	☒ Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

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 changed or on an attachment with an address, with all other like empowered.

SIGNATURE: _Gerald J. Jones, Pres_ GERALD J JONES 4-19-99 (741)993-0866
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / Date / Daytime Phone #

CR2E034 (11/98)