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May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # H54726 (5)

1. Corporation Name  
SOUTHBANK ADVERTISING, INC.

Principal Place of Business  
C/O WILLIAM C. MASON  
1301 RIVERPLACE BLVD., SUITE 1700  
JACKSONVILLE FL 32207  
US

Mailing Address  
C/O WILLIAM C. MASON  
1301 RIVERPLACE BLVD., SUITE 1700  
JACKSONVILLE FL 32207-8047  
US



3. Date Incorporated or Qualified 05/01/1985  
3a. Date of Last Report 08/05/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2607918	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28		
Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
24	25	29	30

9. Name and Address of Current Registered Agent

GRANGER, HARVEY. GENERA  
1301 RIVERPLACE BLVD.  
SUITE 1700  
JACKSONVILLE FL 32207

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstalling) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC COOPER, EDGAR R. 7822 LINKSIDE DRIVE JACKSONVILLE FL	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DP MASON, WILLIAM C. 1301 RIVERPLACE BLVD., SUITE 1700 JACKSONVILLE	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V MULRAIN, JOANELLE 800 PRUDENTIAL DRIVE JACKSONVILLE FL	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	ST JACKSON, REBECCA B. 1301 RIVERPLACE BLVD., SUITE 1700 JACKSONVILLE FL	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D HATCHER, WILLIAM K. 3344 LAKE SHORE BLVD JACKSONVILLE FL	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DV THOMPSON, CAROL C. 1301 RIVERPLACE BLVD., SUITE 1700 JACKSONVILLE FL	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE *Rebecca B. Jackson* Rebecca B. Jackson, Secretary 4-23-97 904/202-4001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

**SOUTHBANK ADVERTISING, INC.**

<b>D</b>	<b>Rowe, Robert L., Jr.</b>	<b>9471 Baymeadows Rd.</b>	<b>Jacksonville, FL 32256</b>
<b>D</b>	<b>Whorton, Judson S.</b>	<b>5443 John Reynolds Dr.</b>	<b>Jacksonville, FL 32211</b>