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Mar 07 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 # H98407 (0)
1. Corporation Name
THE PUB. INC.



Principal Place of Business Mailing Address
% BARRY DODSON % BARRY DODSON
20025 GULF BLVD. 20025 GULF BLVD.
INDIAN SHORES FL 34635-2406 INDIAN SHORES FL 33785-2406

3. Date Incorporated or Qualified 02/07/1986 3a. Date of Last Report 03/14/1996
4. FEI Number 59-2668856 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DODSON, BARRY
20025 GULF BLVD.
INDIAN SHORES FL 33535

81 Name DAVID RUPPEL
82 Street Address (P.O. Box Number is Not Acceptable) 14001 KENSINGTON OAK PLACE
83
84 City LARGO FL 85 Zip Code 33774

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 *David Ruppel* David Ruppel K 3/3/97
(NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	PRESIDENT
NAME	BARRY, DOBSON	1.2 NAME	SHIRLEY DOBSON
STREET ADDRESS	20025 GULF BLVD.	1.3 STREET ADDRESS	456 BATH CLUB BOULEVARD
CITY-ST-ZIP	INDIAN SHORES FL	1.4 CITY-ST-ZIP	NORTH REDINGTON BEACH, FL 33797
TITLE		2.1 TITLE	SECRETARY/TREASURE
NAME		2.2 NAME	DAVID RUPPEL
STREET ADDRESS		2.3 STREET ADDRESS	14001 KENSINGTON OAK PLACE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	LARGO, FL 33774
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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: *David Ruppel* David Ruppel K 3/3/97 595-3172
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)