

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # K87392 (2)

1. Corporation Name
CHC PUBLICATIONS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 10:14

Principal Place of Business
777 CARPENTER'S WAY
LAKELAND FL 33809-3921

Mailing Address
P.O. BOX 95020
LAKELAND FL 33809-3921
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Quashed
05/11/1989

3a. Date of Last Report
03/30/1994

4. FEI Number
59-3139854

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$0.75 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
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PEREZ, JOSEPH A.
777 CARPENTER'S WAY
LAKELAND FL

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 *Joseph A. Perez* *Joseph A. Perez* 3/6/95
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, MALLORY	1.2 NAME	
STREET ADDRESS	707 CARPENTER'S WAY #43	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	GROTHE, ERNIE	2.2 NAME	
STREET ADDRESS	4112 STAFFORDSHIRE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	INGLIS, DAVID	3.2 NAME	
STREET ADDRESS	707 CARPENTER'S WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33809	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	☐ Change ☐ Addition
NAME	STRADER, KARL	4.2 NAME	
STREET ADDRESS	777 CARPENTER'S WAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	4.4 CITY-ST-ZIP	
TITLE	ST	5.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, J. A.	5.2 NAME	
STREET ADDRESS	777 CARPENTER'S WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	5.4 CITY-ST-ZIP	
TITLE		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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(A), 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: *J. A. Perez* *J. A. Perez* 3/6/95 813-849-1477 ext 520
DATE