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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L04670

(0)

FLORIDA PUBLIC COMMUNICATIONS, INC.

Principal Place of Business Mailing Address					i ikbildil bil griff didia bilit indil abili didil bibli kinil albu bibli bibli		
4105 KIDRON ROAD LAKELAND FL 33811 LAKELAND FL 33811							
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address			988			4. FEI Number Applied For	
21		26				59-2959340 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
City & State	9	City & State	City & State			6, Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the current year Intangible	
24			30			Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre					10. Name and Address of New Registered Agent	
VAC	CHABACH, JERRY			61	Name		
1405 SHOREWOOD DR.			;	62	Ctroot Ad	dress (P.O. Box Number is Not Acceptable)	
LAKELAND FL 33803				02	Stieet Au	diess (r.O. box Number is Not Acceptable)	
5	CD40 1 C 00000			83			
				84	City	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508. Florida Sta	tutes, the at	bove	a-named co	prporation submits this statement for the purpose of changing its registered	
I office or r	egistered agent, or both, in the Stat	te of Florida. Such change wa	as authorize	d by	the corpor	ration's board of directors. I hereby accept the appointment as registered	
agent I a	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Stai	uies	i .		
SIGNATURE	Signature, typed or printed name of registered a	and the description (MOTE: Dogietore	d Ann	nt signalura rac	puired when reinstating) DATE	
12.		ND DIRECTORS	13.	u Age	an expressure rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE		1.1 TITLE		Change [] Addition	
NAME	YACHABACH, JERRY			1.2 NAME			
	1405 SHOREWOOD DR.				ADDDECC		
STREET ADDRESS				1.3 STREET ADDRES 1.4 CITY - ST - ZIP			
CITY-ST-ZIP	LAKELAND FL 33803	DELETE				Change Addition	
TITLE	SD	בין טנננונ		2.1 TITLE		C Original Ed vancious	
NAME	MELLON, REGIS		2.2 N		1	•	
STREET ADDRESS	3040 SANDPIPER LANE				ADDRESS		
CITY-ST-ZIP	MULBERRY FL 33860			2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 1	3.1 TITLE		Change Addition	
NAME			3.2 N	AME			
STREET ADDRESS			3.3 S	TREET	ADDRESS		
CITY-ST-ZIP			3.4. 0	ITY-S	ST-ZIP		
TITLE		DELETE	4.1 Ti	4.1 TITLE		Change Addition	
NAME			4.2 N	IAME			
STREET ADDRESS			4.3 S	TREET	ADDRESS		
CITY-ST-ZIP				ITY-S	T-ZIP		
TITLE		DELETE	5.1 TI			Change . Addition	
NAME		_	5.2 N				
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP		DELETE	6.1 Ti		T-ZIP	Change Addition	
TITLE		☐ DELETE	0.111	ILE		- Change - La rodition	

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. SIGNATURE:

NAME

STREET ADDRESS

6.2 NAME

6.3 STREET ADDRESS

941-644-5558

FILED

Mar 24 1998 8:00am

Secretary of State