

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M71340 (7)

1. Corporation Name

CAPITAL MEDIA, INC.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:01**

Principal Place of Business

**696 1ST AVE N
SUITE 201
ST PETERSBURG FL 33701**

Mailing Address

**696 1ST AVE N
SUITE 201
ST PETERSBURG FL 33701**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 03/10/1988	3a. Date of Last Report 04/27/1994
4. FEI Number 59-2877728	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
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**LEFTER, CUSHMAN & WILKINSON, P.A.
696 FIRST AVE. NORTH
SUITE 201
ST. PETERSBURG FL 33701**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	
85. Zip Code	FL

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

Sign over. Typed or printed name of registered agent and board approval.

(NOTE: Registered Agent signature required when necessary)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME DVT- MAY, JOYCE- 2500 CHEVAL DR. HOLIDAY FL	12.2 STREET ADDRESS PO- WYBICKI, OLEANE PO BOX 544 N/A NEW PORT RICHEY FL 34654	13.1 TITLE D/P/S/T	13.2 NAME Thomas R. Cushman
12.3 CITY - ST - ZIP	12.4 CITY - ST - ZIP	13.3 STREET ADDRESS 696 1st Avenue N., #201	13.4 CITY - ST - ZIP St. Petersburg, FL 33701
12.5 NAME	12.6 STREET ADDRESS	13.5 CITY - ST - ZIP	13.6 CITY - ST - ZIP
12.7 NAME	12.8 STREET ADDRESS	13.7 CITY - ST - ZIP	13.8 CITY - ST - ZIP
12.9 NAME	12.10 STREET ADDRESS	13.9 CITY - ST - ZIP	13.10 CITY - ST - ZIP
12.11 NAME	12.12 STREET ADDRESS	13.11 CITY - ST - ZIP	13.12 CITY - ST - ZIP
12.13 NAME	12.14 STREET ADDRESS	13.13 CITY - ST - ZIP	13.14 CITY - ST - ZIP
12.15 NAME	12.16 STREET ADDRESS	13.15 CITY - ST - ZIP	13.16 CITY - ST - ZIP
12.17 NAME	12.18 STREET ADDRESS	13.17 CITY - ST - ZIP	13.18 CITY - ST - ZIP
12.19 NAME	12.20 STREET ADDRESS	13.19 CITY - ST - ZIP	13.20 CITY - ST - ZIP
12.21 NAME	12.22 STREET ADDRESS	13.21 CITY - ST - ZIP	13.22 CITY - ST - ZIP
12.23 NAME	12.24 STREET ADDRESS	13.23 CITY - ST - ZIP	13.24 CITY - ST - ZIP
12.25 NAME	12.26 STREET ADDRESS	13.25 CITY - ST - ZIP	13.26 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)(b), Florida Statutes. I further certify that I am an officer or director of the corporation or the treasurer 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. I am attaching with my address.

SIGNATURE:

Thomas R. Cushman

Thomas R. Cushman

1/18/95 813-823-1514

SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED OFFICE OR DIRECTOR

LEFTER, CUSHMAN & WILKINSON, P.A.

ATTORNEYS AND COUNSELORS AT LAW

J. BAIRD LEFTER
THOMAS R. CUSHMAN
G. BARRY WILKINSON

696 FIRST AVENUE NORTH, SUITE 201
ST. PETERSBURG, FL 33701-3648
TELEPHONE (813) 823-1514
FAX (813) 823-0328

February 14, 1995

Division of Corporations
Annual Reports
Caller Service #1500
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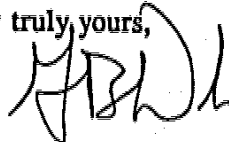
Re: Capital Media, Inc.

Dear Sir or Madam:

Please file the enclosed 1995 Annual Report for the above corporation. Enclosed is our check for \$208.75 to cover the filing fee and a Certificate of Status.

If you have any questions or if there is a problem with the filing, please telephone this office before returning the documents. Your prompt attention to this matter is appreciated.

Very truly yours,



G. Barry Wilkinson

GBW:dt

Enclosures