

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

01-13-2003 90142 015 ****61.25

DOCUMENT # N33162

1. Entity Name

FLORIDA NEWSPAPER ADVERTISING NETWORK, INC.



Principal Place of Business

633 N. ORANGE AVE.
MAILPOINT ~~104~~ **601**
ORLANDO FL 32801
US

Mailing Address

633 N. ORANGE AVE.
MAILPOINT ~~104~~ **601**
ORLANDO FL 32801
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0136810**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERRY, ROBERT A
633 N. ORANGE AVE.
MAILPOINT ~~104~~ **601**
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> Delete
NAME	PAULMAN, BRUCE	
STREET ADDRESS	202 S PARKER AVE	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE	SD	<input type="checkbox"/> Delete
NAME	GALANOS, SALLY	
STREET ADDRESS	2121 SW 19TH AVE	
CITY-ST-ZIP	OCALA FL 34474	
TITLE	CD	<input type="checkbox"/> Delete
NAME	REEVES, RICHARD	
STREET ADDRESS	490 FIRST AVE SOUTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33701	
TITLE	VC	<input type="checkbox"/> Delete
NAME	WEIMER, JAY	
STREET ADDRESS	ONE RIVERSIDE AVE	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	T	<input type="checkbox"/> Delete
NAME	HASELDEN, BARRY	
STREET ADDRESS	633 N ORANGE AVE	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCHMIDT, STEVE	
STREET ADDRESS	300 W LIME STREET	
CITY-ST-ZIP	LAKELAND FL 33815	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CHAIRMAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAY WEIMAR	
STREET ADDRESS	ONE RIVERSIDE AVE	
CITY-ST-ZIP	JACKSONVILLE, FL 32202	
TITLE	VICE CHAIRMAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRY HASELDEN	
STREET ADDRESS	633 N. ORANGE AVE	
CITY-ST-ZIP	ORLANDO, FL 32801	
TITLE	TROOP SUGAR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEVE SCHMIDT	
STREET ADDRESS	300 W. LIME STREET	
CITY-ST-ZIP	LAKELAND, FL 33815	
TITLE	MONA NEYLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SECRETARY	
STREET ADDRESS	SARASOTA, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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, trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert A. Berry

9-3-03

407-420-6112

CR2E037 (4/03)

attachment

FLORIDA NEWSPAPER ADVERTISING
NETWORK, INC.
633 N. ORANGE AVENUE
M.P. NO 104
ORLANDO, FL 32801

SUNTRUST
SUNTRUST BANK
63-215/631 665

10004086

5470

1/7/2003

PAY TO THE ORDER OF Florida Department of State

\$**61.25

Sixty-One and 25/100

DOLLARS

Florida Department of State
Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

MEMO

Robert A. Berry
AUTHORIZED SIGNATURE

⑈005470⑈

⑈063102152⑈0665825626935⑈

⑈0000006125⑈

55055878
#n33162

SUNTRUST ORL 01172003
5772-001 INCL
2000197501

COMMERCIAL POCKET 014
PROCESSED 01/19/03

BANK OF AMERICA, NA JAX
⑈0630000647⑈ E0657 90 P10
01/16/08

6140742559

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT # 1000008798

JAN 13 2003

2172 76037