FILE NOW: FILING FEE IS \$61.25

CORPORATION ANNUAL REPORT

FILED Feb 04 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS

CHILDREN'S NEWSPAPER, INC. Principal Place of Business 345 GRAMADR ROAD W. PALM BEACH FL. 30405 W. PALM BEACH FL. 30401 Builts, Apt. W. old. 25 Usins, Apt. W. old. 27 Usins, Apt. W. old. 28 Usins, Apt. W. old. 29 Usins, Apt. W. old. 27 Usins, Apt. W. old. 29 Usins, Apt. W. old. 20 Usins, Apt. W. old. 27 Usins, Apt. W. old. 28 Usins, Apt. W. old. 29 Usins, Apt. W. old. 20 Usins, Apt. W. old. 21 Usins, Apt. W. old. 22 Usins, Apt. W. old. 23 Usins, Apt. W. old. 24 Usins, Apt. W. old. 25 Usins, Apt. W. old. 26 Usins, Apt. W. old. 27 Usins, Apt. W. old. 28 Usins, Apt. W. old. 29 Usins, Apt. W. old. 20 Usins, Apt. W. old. 21 Usins, Apt. W. old. 22 Usins, Apt. W. old. 23 Usins, Apt. W. old. 24 Usins, Apt. W. ol	DOCUI	MENT # N9200	0000184 (3)								
Bad GRAMADA ROAD W. PALM BEACH FL 2040 W. PO ROX 7521 WEST PALM BEACH FL 3045 2. Principal Place of Business 2. A. Mailing Address 2. Principal Place of Business 2. A. Mailing Address 3. Data Interpretate or Cualified 1102/1992 4. FE Name 1102/1992 4. FE Name 2. Principal Place of Business 2. A. Mailing Address 3. Certificate of Statute Desired 7. Report Report Place of Business 2. A. Mailing Address 3. Certificate of Statute Desired 7. Report Report Place of Business 2. A. Mailing Address 3. Certificate of Statute Desired 7. Report Report Place of Business 2. A. February 2. Solida, April 4, etc. 2. Thus Fund Controlled of Statute Desired 7. Is the nonprofit Corporation on bencourses associator? 2. Proceedings of Country 2. Degree of			·	-								
March Maching Address Master Master Maching Address Master Maching Address Master Maching Address Master Maching Address Maching												
N. PALM BEACH FL. 23401 WEST PALM BEACH FL. 23405 AFRINGS State AFRINGS State AFRINGS AFRINGS AFRINGS AFRINGS AFRINGS AFRICA AFRINGS AFRICA AFRINGS AFRICA AFR	Principal Plac	e of Business	Mailing Address	-,			_					
Applied For				_			-	3. Date Incorporated or Qualified			. :	٦
2. Principal Place of Bushness 2a. Mailing Address 5. Certificate of Status Desired \$8.75 Additional Fee Required 55. Outside, Apt. #, etc. 27. City & State 27. Is the nonprofit copporation to promove or far apriled to Feet 28. City 29. Discourage 29. Discou	W. PALM BEAC	7H FL 33401	WEST PALM BEACH FL 3	3405			L	11/03/1992				
2. Principal Flace of Business										Ar	plied For	7
Suite, Apt. #, etc.								65-0372496		No	t Applicable	با:
Suite, Apt. 8, etc. Suite, Apt. 8, etc.	_ '	lace of Business	<u>⊢</u> ¬ ~ .					5. Certificate of Status Desired]			1
City & State		#, etc.						6 Election Campaign Financing			-	+
28	22		27									1
Zip	Clty & State	е	City & State					7. Is this nonprofit corporation a home	owners a	ssociatio	n?	7
PRUITT, ALISON 349 GRANADA ROAD 380									es 🗆 1	10		_
9. Name and Address of Current Registered Agent PRUITT, ALISON 349 GRANADA ROAD WEST PALM BEACH FL 33401 11. Parament to the provisions of Sections 617/1502 and 617/1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing for registered agent. I arm familiar will, and agocept the dust obtaining the spicial statutes agent. I arm familiar will, and agocept the dust obtaining the spicial statutes. The above-named corporation submits this statement for the purpose of changing for registered agent. I arm familiar will, and agocept the dust obtaining the spicial statutes agent agent and till registation of 17/1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing to registered agent. I arm familiar will, and agocept the dust obtaining the spicial statutes agent agent agent and till registation. Sociol 617/1500, Florida Statutes, and agent a		⊢ , '	 	-	untry							
PRUITT, ALISON 349 GRANADA ROAD WEST PALM BEACH FL 33401 11. Pursuant to the provisions of Sections 617 (502 and 617, 1506, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered agent. I are lamiliar with and acceptable) 12. CFFICERS AND DIRECTORS SIGNATURE SIGNATURE PRUITT, ALLISON 349 GRANADA ROAD DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13. STREET ADDRESS SIGNATURE USEST PALM BEACH FL 33401 TITLE THE THE THE THE THE THE THE THE THE T	24										_ No	4
PRUITT, ALISON 349 GRANADA ROAD WEST PALM BEACH FL 33401 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or the state of the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, its minimal with remaining agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, are familiar with remaining agent		5. Ivalie and Addiess of Curren	iit negistered Agent		81	Name		to. Name and Address of New Negist	ereu Age			4
WEST PALM BEACH FL 33401 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, in the state of the purpose of changing its registered agent in the registered agent and series are greated by the corporation's board of directors, I hereby accept the purpose of changing its registered agent, or both, in the State of Greated Based Agent agent and series and greated by the corporation's board of directors, I hereby accept the purpose of changing its registered agent. 12.	DOLUTT	ALICON										4
WEST PALM BEACH FL 33401 11. Pursuant to the provisions of Sections 617.0502 and 617.0502 and 617.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered orifice or registered ages), or both, in the State of Florida. Such change was authorized by the corporation's board of clirectors, I hereby accept the appointment as registered agent. I are familiar with and or copt the chastion of Section 617.0503. Florida Statutes. 1. 20	•				82	Street Add	dress	(P.O. Box Number is Not Acceptable)				
### City ###	- 10 - 11				83							-
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, 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, 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 accept the appointment as registered by the corporation's board of directors. I hereby accept the appointment as registered of the provision of the appointment as registered agent of both. In the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the appointment as registered of the provision of the appointment as registered agent. I hereby accept the appointment as registered of the provision of the appointment as registered of the appointment as regis	1,20,17	ALM DENOTE 1 C 00401				014			·		<u> </u>	4
SIGNATURE Signature, good or printed name in legislancia agreet and tile if explication. (NOTE, Registered Agent dispensaries required to printed name in legislancia agreet and tile if explication. (NOTE, Registered Agent dispensaries required virtual registration) Deleter						FL 85 Zip Code					Code	
SIGNATURE Signature, good or printed varies in registratical agreet and tile it experiences to. (NOTE, Registrated Agent elignature required vehan reinstating)	11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statu	tes, the a	bove-	-named co	rpora	itlon submits this statement for the purp	ose of ch	anging it	s registered	7
SIGNATURE Signature, good or printed name in legislancia agreet and tile if explication. (NOTE, Registered Agent dispensaries required to printed name in legislancia agreet and tile if explication. (NOTE, Registered Agent dispensaries required virtual registration) Deleter	agent, I a	m familiar with and accept the object	rations of Section 617.0503. F	lorida Sta	itutes.		auon	s board or directors, Thereby accept its		ποπ.αs γ Φ	registered	1
TILE ED	SIGNATURE	fu m	MAT			_		;	80	10_		
NAME STREET ADDRESS 349 GRANADA ROAD 1.2 NAME 1.3 STREET ADDRESS 349 GRANADA ROAD 1.3 STREET ADDRESS 3.5 STREET ADDRESS						it signature req	ulred w			BECTOE	S IN 12	-16
NAME STREET ADDRESS 349 GRANADA ROAD 1.2 NAME 1.3 STREET ADDRESS 349 GRANADA ROAD 1.3 STREET ADDRESS 3.5 STREET ADDRESS		,						7.5577.04,07.11.10.20.70.04.70.27.1				75
City-St-Zip	NAME			1.2 N						_		
City-St-Zip	STREET ADDRESS			1.3 S								18
NAME	CITY-ST-ZIP			1.4 C	1.4 CITY-ST-ZIP							18
1400 PALM CIRCLE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	TITLE	PT	DELETE 2.1 T		2.1 TITLE					Change	Addition	\[C
CITY-ST-ZIP WEST PALM BEACH FL TT STUMP, MITCHELL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH LAKES BLVD, #1400 3.2 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL DELETE A1 TITLE TITLE TITLE TITLE TITLE SIMON, BREN STREET ADDRESS 1100 S. OCEAN BLVD 4.2 STREET ADDRESS CITY-ST-ZIP MARALAPAN FL DELETE 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE OBLETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE OBLETE 6.3 STREET ADDRESS CITY-ST-ZIP Change Addition Addition Addition Addition Addition Addition Addition Addition Addition AME STREET ADDRESS CITY-ST-ZIP	NAME			2.2 N	2.2 NAME							
TITLE TT DELETE 3.1 TITLE 3.2 NAME STUMP, MITCHELL 3.2 NAME STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH LAKES BLVD, #1400 WEST PALM BEACH FL 3.4 CITY-ST-ZIP TITLE T DELETE 4.1 TITLE Change Addition NAME SIMON, BREN 4.2 NAME STREET ADDRESS 1100 S. OCEAN BLVD 4.3 STREET ADDRESS CITY-ST-ZIP MARALAPAN FL ACTIV-ST-ZIP TITLE DELETE 5.1 TITLE CHANGE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE CHANGE Addition NAME STREET ADDRESS 5.4 CITY-ST-ZIP TITLE CHANGE Addition NAME STREET ADDRESS 5.5 CITY-ST-ZIP TITLE CHANGE ADDRESS 6.3 STREET ADDRESS 5.5 CITY-ST-ZIP TITLE CHANGE ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	STREET ADDRESS				1							
NAME STUMP, MITCHELL STREET ADDRESS 1555 PALM BEACH LAKES BLVD, #1400 3.3 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL T ITILE T SIMON, BREN SIMON, BREN STREET ADDRESS CITY-ST-ZIP MARALAPAN FL DELETE 1100 S. OCEAN BLVD 4.3 STREET ADDRESS CITY-ST-ZIP MARALAPAN FL DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP NAME 5.4 CITY-ST-ZIP NAME 5.5 STREET ADDRESS CITY-ST-ZIP NAME 5.5 STREET ADDRESS CITY-ST-ZIP NAME 5.6 NAME 5.7 STREET ADDRESS CITY-ST-ZIP NAME 5.8 STREET ADDRESS CITY-ST-ZIP NAME 5.8 STREET ADDRESS CITY-ST-ZIP 6.8 STREET ADDRESS CITY-ST-ZIP 6.8 STREET ADDRESS CITY-ST-ZIP 6.8 STREET ADDRESS CITY-ST-ZIP 6.9 STREET ADDRESS CITY-ST-ZIP 6.9 STREET ADDRESS CITY-ST-ZIP 6.9 STREET ADDRESS CITY-ST-ZIP 6.9 STREET ADDRESS CITY-ST-ZIP										Changa	Addition	4
STREET ADDRESS 1555 PALM BEACH LAKES BLVD, #1400 3.3 STREET ADDRESS WEST PALM BEACH FL 3.4, CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·						•	L	orange	FT Adminos)	
CITY-ST-ZIP WEST PALM BEACH FL 3.4. CITY-ST-ZIP	1					IDDDECC						1
TITLE T DELETE 4.1 TITLE	· 1	MEAT DALL BEACH EI				Į.						
NAME			DELETE			1-ZIP				Change	Addition	1
STREET ADDRESS 1100 S. OCEAN BLVD	ĺ	·			- 1				_			1
CITY-ST-ZIP MARALAPAN FL	STREET ADDRESS			4.3 S								
TITLE	' i				1					_		ľ
STREET ADDRESS			☐ DELETE	5.1 T	TILE					Change	Addition	7
CITY-ST-ZIP	NAME			5.2 N	AME	1						1
TITLE DELETE 6.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS			5.3 \$	TREET A	ADDRESS						
NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP						- ZIP			· · · · · · · · · · · · · · · · · · ·	O.	17	4
STREET ADDRESS G.3 STREET ADDRESS G.4 CITY-ST-ZIP G.4 CITY-ST-ZIP			☐ DELETE						Ш	Change	L Addition	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	J											
		ertify that the information supplied v	with this filing does not qualify				in Sec	ction 119.07(3)(i), Florida Statutes. I furt	her certify	that the	information	\dashv

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address.

GNATURE:

GNATURE:

SIGNATURE: