

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106448

Entity Name: INFO PUBLICATIONS, INC.

FILED  
Jan 28, 2005  
Secretary of State

## Current Principal Place of Business:

2330 NW 53 STREET  
BOCA RATON, FL 33496

## New Principal Place of Business:

5428 NW 20TH AVE  
BOCA RATON, FL 33496

## Current Mailing Address:

2330 NW 53 STREET  
BOCA RATON, FL 33496

## New Mailing Address:

5428 NW 20TH AVE  
BOCA RATON, FL 33496

FEI Number: 22-3876870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FUNK, DAVID G  
2330 NW 53RD STREET  
BOCA RATON, FL 33496 US

## Name and Address of New Registered Agent:

FUNK, DAVID G  
5428 NW 20TH AVE  
BOCA RATON, FL 33496 US

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.

SIGNATURE: DAVID G. FUNK

01/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FUNK, DAVID G  
Address: 2330 NW 53RD STREET  
City-St-Zip: BOCA RATON, FL 33496

Title: ST ( ) Delete  
Name: FUNK, JOAN D  
Address: 2330 NW 53RD STREET  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FUNK, DAVID G  
Address: 5428 NW 20TH AVE  
City-St-Zip: BOCA RATON, FL 33496

Title: ST (X) Change ( ) Addition  
Name: FUNK, JOAN D  
Address: 5428 NW 20TH AVE  
City-St-Zip: BOCA RATON, FL 33496

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID G. FUNK

PRES

01/28/2005

Electronic Signature of Signing Officer or Director

Date