


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000010274 1. Entity Name GEMINI NEWSPAPERS, INC.	
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Principal Place of Business 260 WILLOW STREET PORT ST. JOE, FL 32456 US	Mailing Address 2272 LUTEN RD QUINCY, FL 32352 US
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DO NOT WRITE IN THIS SPACE



01202006 No Chg-P CR2E034 (11/05)

4. FEI Number **20-0630498** Applied For ☐ Not Applied ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ISELL, RON
260 WILLOW STREET
PORT ST. JOE, FL 32456**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CONNELLY, DWIGHT 14026 RIDGELAWN ROAD MARTINSVILLE, IL 62442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ISELL, RON 260 WILLOW ST PORT ST. JOE, FL 32456
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ISELL, RON 260 WILLOW ST PORT ST. JOE, FL 32456
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ISELL, RON 260 WILLOW ST PORT ST. JOE, FL 32456
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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01/25/06-80046-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowerment.

SIGNATURE: *Ronald S. Isell* **1-20-06 850-627-761**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #