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

CORPORATION ANNUAL REPORT



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

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**DOCUMENT #** P11265

(8)

VAL-PAK DIRECT MARKETING SYSTEMS, INC.  Principal Place of Business  BR05 LARGO LAKES DR LARGO FL 34643  ATLANTA GA 30319 IIS									
		US			3. Date Incorporated or Qua 08/28/1986		e of Last F	•	
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied F		
21		26			59-2713628		Not Applic		₽
Suite, Apt. #	e, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desir	ed 🔲		5 Additional Required	
City & State		City & State			6. Election Campaign Finance	ninci		<del></del>	-
23		28			Trust Fund Contribution		□ \$5.00 May Be Added to Fees		
ZIp	Country	Zip	Country		8. This corporation has liabil	ity for intangible t			
24	25	29	30			Yes No			_
	9. Name and Address of Current	Registered Agent		241	10. Name and Address of I	New Registered	Agent		_
				81 Name					
	rporation system			82 Street	Address (P.O. Box Number is Not Acc	ceptable)			$\neg$
	OUTH PINE ISLAND ROAD					······································			_
PLANTA	TION FL 33324			83					
			<u> </u>	84 City			85 Z	ip Code	$\dashv$
	the provisions of Sections 607.0502 a					FL	<u>-                                     </u>		_
or registere familiar with SIGNATURE	ed agent, or both, in the State of Florida n, and accept the obligations of, Section	. Such change was authorizen 607.0505, Florida Statutes	ed by the co	orporation's	board of directors. I hereby accept th	e appointment a	registered	d agent. I am	
	Signature, typed or printed name of registered agent an			gent signature	required when reinstating)	DATE			<u>(</u>
12.	OFFICERS AND PTD	DELETE	13. 1.1 Til		ADDITIONS/CHANGES TO		□ Change	DHS IN 12 Addition	CR2E034 (12/95)
NAME	DISBROW, WILLIAM		1.2 NA				Change	LT Modition	[
STREET ADORESS	312 GULF BLVD			EET ADDRESS					8
CITY-ST-ZIP	INDIAN ROCKS BCH FL			Y-ST-ZIP					
TOLE	CV	[ ] DELETE	2. 1 TIT				Change	☐ Addition	⊣შ
NAME	MUSSELMAN, JR, ROBERT	_	2 2 NAME				_		
STREET ADDRESS	115 8TH ST E		2.3 STREET ADDRESS						
CITY-ST-ZIP	TIERRA VERDE FL			Y-\$T-ZIP					
TITLE	V	☐ DELETE	3. 1 11				Change	☐ Addition	7
NAME	BARNETT, PRESTON B.		3.2 NA	ИE					
STREFT ADDRESS	1400 LAKE HEARN DR.		3.3 STI	REET ADDRESS	* *				
CITY-ST-ZIP	ATLANTA GA		3 4 CIT	Y - ST - ZIP					_
TITLE	٧	DELETE	4. 1 TIT	LE	S Lav Andrew A		☐ Change	Addition	
NAME	ELMER, DIANE		4.2 NA		Merdek, Andrew A				
STREET ADDRESS	11240 8TH ST E		1	EET ADDRESS	1400 Lake Hearn D	216			
CITY-ST-ZIP	TREASURE ISLD. FL	<b>Notice</b>		Y-ST-ZIP	Atlanta GA. 303		C) (+	And Asserts	_
TITLE	NOTIONOM TOGERA	DELETE	5. 1 TIT	Lt 45	VP TOUR.		Change	Addition	
NAME	Bourdow, Joseph 15462 Gulf Blvd., #807		5.2 NAM	AE CET ADORSOS	Smith, Jay R. 1400 Lake Hearn Dri Atlanta Ba. 30319	ve			
STREET ADDRESS	MADEIRA BEACH FL			EET ADDRESS	1400 Me 67 30316	i			
CITY-ST-ZIP TITLE	V	DELETE	5.4 CIT		PTTI WATH ONLY WORLD		Change	Addition	$\dashv$
NAME	JOHNSON, WILLIAM	DECETE	62 NAM				change	L. Addition	
STREET ADDRESS	1491 ROSETREE CT			EET ADDRESS					
CITY-ST-ZIP	CLEARWATER FL			r-St-ZIP					
14. I do hereby	certify that the information supplied wit		shed and d	oes not qua					$\dashv$
certify that	the information indicated on this annual am an officer or director of the corpora Block 12 or Block 13 if changed, or on	report or supplemental anno- tion or the receiver or trusted an attachment with an addr	ual report is e empowere ess.	true and a od to execu	ccurate and that my signature shall hav te this report as required by Chapter 6	ve the same legal	effect as i	if made under	
SIGNATI		di Inar	STON B PRESI R OR DIRECTO	DENT -	TAX 4/11/96	(404)	843- Daytme Phone	5184	-