

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra P. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P22916 (1)

1. Corporation Name

LeBlanc Communications Inc.

Principal Place of Business

Mailing Address

2301 Bridgeport Drive
PO Box 3807
Sioux City, IA 51102-3807

PO Box 3807
Sioux City, IA 51102-3807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1989

4. FEI Number

43-1197693

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Gibbs, Ronald L.
Lodestar Centre
218 U.S. Hwy. #1, Suite 300
Tegucigalpa, FL 33469

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and FEI if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE / Pres. & Dir. ☐ DELETE
NAME Keith E. DeBelser
STREET ADDRESS 514 Chantwell Rd.
CITY-ST-ZIP Oakville, ON L6T 5G5 Canada

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V Secretary & Treasurer & Dir ☐ DELETE
NAME Carla S. Pike
STREET ADDRESS 2301 Bridgeport Drive
CITY-ST-ZIP Sioux City, IA 51111-1001

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE V CEO & Director ☐ DELETE
NAME George F. Patton
STREET ADDRESS 514 Chantwell Rd.
CITY-ST-ZIP Oakville, ON L6T 5G5 Canada

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE Asst. Secy. & Dir. ☐ DELETE
NAME Thomas F. Byrne
STREET ADDRESS 8 King St. E.
CITY-ST-ZIP Toronto, ON M5E 1G5 Canada

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE Director ☐ DELETE
NAME G. James Wilson
STREET ADDRESS 3900 Blue River Court
CITY-ST-ZIP Ellicott City, MD 21042

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V Asst. Secy. & Asst. Treas. ☐ DELETE
NAME Daniel W. Reak
STREET ADDRESS 2301 Bridgeport Drive
CITY-ST-ZIP Sioux City, IA 51111-1001

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplied with this report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of this 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carla S. Pike

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/97)