

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P25276

(7)

1. Corporation Name

FLORIDA SUN PUBLICATIONS, INC.

Principal Place of Business

717 FIRST STREET, EAST
P.O. BOX 811
BRADENTON FL 34208

Mailing Address

717 FIRST STREET, EAST
P.O. BOX 811
BRADENTON FL 34208



3. Date Incorporated or Qualified

07/21/1989

3a. Date of Last Report

03/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0133064

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRAY, EDWIN W
717 1ST STREET EAST
717 FIRST STREET EAST
BRADENTON FL 34208

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C ☐ DELETE

NAME JACKSON, BRUCE
STREET ADDRESS 333 KING STREET EAST
CITY-ST-ZIP TORONTO ON

1 1 TITLE

1 2 NAME

1 3 STREET ADDRESS

1 4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE P ☐ DELETE

NAME DEMPSEY, WILLIAM
STREET ADDRESS 0903 GAINSBOROUGH RD
CITY-ST-ZIP HYDE PARK ONTARIO CA

2 1 TITLE

2 2 NAME

2 3 STREET ADDRESS

2 4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ST ☐ DELETE

NAME GARY, EDWIN W
STREET ADDRESS 717 1ST STREET EAST
CITY-ST-ZIP BRADENTON FL

3 1 TITLE

3 2 NAME

3 3 STREET ADDRESS

3 4 CITY-ST-ZIP

ST
Gray, Edwin W
717 1st Street East
Bradenton, FL 34206

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4 1 TITLE

4 2 NAME

4 3 STREET ADDRESS

4 4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5 1 TITLE

5 2 NAME

5 3 STREET ADDRESS

5 4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6 1 TITLE

6 2 NAME

6 3 STREET ADDRESS

6 4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Edwin W. Gray

Edwin W. Gray

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-96

(941)748-4140

Date

Daytime Phone #

CR2E034 (12/95)