

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Sep 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P25603

(2)

1. Corporation Name

MAGNA-GRAPHIC/SOUTH, INC.

Principal Place of Business

2528 PALUMBO DR.
LEXINGTON KY 40509

Mailing Address

2528 PALUMBO DR.
LEXINGTON KY 40509

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/11/1989

3a. Date of Last Report

04/16/1996

4. FEI Number

61-1164454

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

MITCHELL, CHARLES JR
542 PINE CREEK DRIVE
ORLANDO FL 32811

10. Name and Address of New Registered Agent

81 Name Charles A. Mitchell, Jr.
82 Street Address (P.O. Box Number is Not Acceptable)
4525 Vine land Rd. Unit #209
83
84 City Orlando FL 85 Zip Code 32811

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's signature required when installing)

DATE

9/3/97

12. OFFICERS AND DIRECTORS

TITLE VCD ☒ DELETE
NAME ENGLE, KENNEDY
STREET ADDRESS 2528 PALUMBO DR.
CITY-ST-ZIP LEXINGTON KY

TITLE VTD ☐ DELETE
NAME MITCHELL, CHARLES D., JR
STREET ADDRESS 2528 PALUMBO DR.
CITY-ST-ZIP LEXINGTON KY

TITLE DC ☐ DELETE
NAME MITCHELL, CHARLES D.
STREET ADDRESS 2528 PALUMBO DR.
CITY-ST-ZIP LEXINGTON KY

TITLE VCD ☒ DELETE
NAME ENGLE, KENNEDY
STREET ADDRESS 2528 PALUMBO DRIVE
CITY-ST-ZIP LEXINGTON KY

TITLE VPC ☐ DELETE
NAME HORDL, III CHARLES W.
STREET ADDRESS 2528 PALVUMBO DR.
CITY-ST-ZIP LEXINGTON KY

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

14. I do 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 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 on an attachment with an address.

SIGNATURE:

9/3/97

CR2E034 (4/97)