

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

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Apr 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P26416 (8)

1. Corporation Name
INTRA-SOUTH PUBLICATIONS, INC.



Principal Place of Business
5200 BLISS RD
P.O. BOX 21786
SARASOTA FL 34233
US

Mailing Address
5200 BLISS RD
P.O. BOX 21786
SARASOTA FL 34233
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 4014 Green Tree Ave.
Suite, Apt. #, etc.
22
City & State
23 Sarasota FL
Zip Country
24 34233 25
2a. Mailing Address
26 4014 Green Tree Ave.
Suite, Apt. #, etc.
27
City & State
28 Sarasota FL
Zip Country
29 34233 30

3. Date Incorporated or Qualified
10/11/1989
4. FEI Number
59-1670865
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
7. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
BENDER, PHILIP M.
809 MYRTLE AVE
VENICE FL 34292
10. Name and Address of New Registered Agent
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	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENDER, PHILIP M.	1.2 NAME	
STREET ADDRESS	5200 BLISS ROAD	1.3 STREET ADDRESS	4014 Green Tree Ave.
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	Sarasota FL 34233
TITLE	STD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENDER, KAREN E.	2.2 NAME	
STREET ADDRESS	5200 BLISS ROAD	2.3 STREET ADDRESS	4014 Green Tree Ave.
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Sarasota FL 34233
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BENDER, PHILIP MARK	3.2 NAME	
STREET ADDRESS	809 MYRTLE AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	3.4 CITY-ST-ZIP	34292
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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: *[Signature]* 3/4/98 (911) 924-7024

CR2E034 (10/97)