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FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P38114 (5)
1. Corporation Name
TURNSTILE PUBLISHING COMPANY

Principal Place of Business 7657 COMMERCE CENTER DRIVE ORLANDO FL 32819 US	Mailing Address 7657 COMMERCE CENTER DRIVE ORLANDO FL 32819 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/30/1982	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 13-3653549		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	C
NAME	CRAM, RAMSAY E	1.2 NAME	
STREET ADDRESS	411 LAKEWOOD	1.3 STREET ADDRESS	5536 Isleworth Country Club Dr.
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	Windermere, FL 34786
TITLE	PSD	2.1 TITLE	P
NAME	HANSON, KENNETH H JR.	2.2 NAME	
STREET ADDRESS	5277 ISLEWORTH COUNTRY CLUB DRIVE	2.3 STREET ADDRESS	5111 Isleworth Country Club Dr.
CITY-ST-ZIP	WINDERMERE FL 34786	2.4 CITY-ST-ZIP	Windermere, FL 34786
TITLE	EVP	3.1 TITLE	
NAME	BECKSON, ERIC	3.2 NAME	
STREET ADDRESS	1905 ELIZABETH AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	VP
NAME	CRAM, MERRILEE P	4.2 NAME	
STREET ADDRESS	411 LAKEWOOD	4.3 STREET ADDRESS	5536 Isleworth Country Club Dr.
CITY-ST-ZIP	WINTER PARK FL 32789	4.4 CITY-ST-ZIP	Windermere, FL 34786
TITLE	F	5.1 TITLE	T
NAME	Heather Hanson	5.2 NAME	Heather Hanson
STREET ADDRESS	5111	5.3 STREET ADDRESS	5111 Isleworth Country Club Dr.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Windermere, FL 34786
TITLE		6.1 TITLE	S
NAME		6.2 NAME	Cindi Cram
STREET ADDRESS		6.3 STREET ADDRESS	240 Central Park S, Apt 200
CITY-ST-ZIP		6.4 CITY-ST-ZIP	New York, NY 10019

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 in an attachment with an address.

SIGNATURE: _____

4/1/98 467345526

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