2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 08:00 AM DOCUMENT # P38114 1. Entity Name **Secretary of State** TURNSTILE PUBLISHING COMPANY Principal Place of Business Mailing Address 1500 PARK CENTER DR 1500 PARK CENTER DR ORLANDO FL ORLANDO FL 32835 32835 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-3653549 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL32301 US Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 04/30/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ST TITLE CR2E034 (11/00) ☐ Delete TITLE ST ☐ Addition X Change MAME CRAIN CINDI NAME CRAIN CINDI 240 CETNRAL PARK S, APT 20D STREET ADDRESS STREET ADDRESS 240 CENTRAL PARK S, APT 20D CITY-ST-ZIP NEW YORK NY 10019 CITY-ST-ZIP NEW YORK VP ☐ Delete TITLE ☐ Change NAME CRAIN MERRILEE P NAME STREET ADDRESS 5536 ISLEWORTH COUNTRY CLUB DR STREET ADDRESS CITY-ST-ZIP WINDERMERE FL 34786 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition BECKSON ERIC NAME STREET ADDRESS 1905 ELIZABETH AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO 32804 CITY-ST-ZIP ☐ Delete TITLE Change Change Addition HANSON KENNETH NAME STREET ADDRESS 1600 ALABAMA WAY, #301 STREET ADDRESS CITY-ST-ZIP WINTER PARK 32789 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CRAIN RAMSAY NAME STREET ADDRESS 5536 ISLEWORHT COUNTRY CLUB DR STREET ADDRESS CITY-ST-ZIP WINDEMERE 34756 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

04/30/2001

Daytime Phone #

Date

Eric Beckson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _