May 19, 1999 8:00 am Secretary of State

05-19-1999 90001 026 ***750.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200007014

1. Corporation Name

GULF / ATLANTIC PUBLISHING, INC.

							1111		(1881) (1881) (1			Biblii	8 81 9 1 81 88 83
Principal Place				ŀ									
1801 LEE RD		1947 LEE ROAD				Ì							
STE 306	1 22700	WINTER PARK FL 32789 US					DO NOT WRITE IN THIS SPACE						
WINTER PARK F	-L 32/03	03					3, Date Incorporated or Qualifed						
						- 1	11/23/						1
2 Principal Pl	ace of Business	2a, Mailing Address					4. FEI Nun				\Box	App	lied For
-		26					59-315	4517				Not	Applicable
Suite, Apt. 1	_Lee_Road #. etc.	Suite, Apt. #, etc.					_		One-inord		\$8.7	75 A	ditional
		27	و بالم	e e e e	-	e. 📲		e of Status			Fe	e Req	uired
City & State		City & State					6. Election	Campaign f	inancing		\$ 5.	л ОО .	/lay Be
23 Winte	r Park, FL 32789	28				Trust Fund Contribution Added to Fees							
Zip	Country	Zip	Cou	intry			8. This cor	ooration owe	es the cur	rrent year Inta			_
327	89 25 Orange	29	30					Property T			Yes		⊒No
	9. Name and Address of Current	Registered Agent		24			0. Name a	nd Address	of New	Registered /	Agent		
ADOI	NOEE LEN			81	Name	1							
ARONOFF, LEN 1947 LEE ROAD				82	Street /	t Address	ress (P.O. Box Number is Not Acceptable)						
						_							
AAHAI	ER PARK FL 32789			83									
-				84	City					P* 1	85	Zip Co	ode
										FĻ	بلب		·
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was a	authorized	י עס כ	tne corpo	d corporat poration's	ion submits board of di	this statem rectors. I he	ent for the reby acce	e purpose of ept the appoir	cnangin itment a	g its i as regi	egistered istered
SIGNATURE													
	Signature, typed or printed name of registered agent a			i Agen	t signature re	required who	n reinstating)	10.01141101	FO FO O	DATE AAI	0.000	CTO	OC IN 12
12.	OFFICERS AND	DELETE	13.	—		10	ADDITIO	15/CHANG	=5100	FFICERS AN	Cha		Addition
TITLE	P DODERT	MOELLIE				P.	. 4	_		_			N
NAME	JORDAN, ROBERT		1.2 N		4000500			, Dor		R.			
STREET ADDRESS	1801 LEE RD, #301 WINTER PARK FL 32789				ADDRESS	1		Road		20700			
CITY-ST-ZIP	WINTER FARK FL 32709	☐ DELETE	1.4 C	TY-SI	-ZIP	T-M-T	iter i	Park,	FL—	32789	☐ Cha	inge	Addition
TITLE			2.2 NA									•	_ {
NAME			2.3 STREE		ADDDESS								
STREET ADDRESS			2. 4 CITY-ST-ZIP			1							
CITY-ST-ZIP		☐ DELETE			1-217						☐ Cha	inge	☐ Addition
l		<u></u>	3,2 NAME		ì								
NAME STDEET ADDRESS			3.3 STREET ADDRESS		s								
STREET ADDRESS			3.4. CITY-ST-ZIP										
CITY-ST-ZIP		☐ DELETE			1-21						☐ Cha	ange	☐ Addition
NAME		_	4, 2 NAME										
STREET ADDRESS			4,3 STREET ADDRESS		s								
				ITY- \$1									
CITY-ST-ZIP TITLE		☐ DELETE	5.1 T								☐ Cha	ange	Addition
NAME			5.2 N	AME									
STREET ADDRESS			5.3 S	TREET	ADDRESS	s							
CITY-ST-ZIP			5,4 C	ITY-SI	r-ZiP								
TITLE		☐ DELETE	6.1 T	TLE		1	 -				☐ Cha	ange	Addition
NAME			6.2 N	AME									
STREET ADDRESS			6.3 S	TREET	ADDRESS	s							

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 suppliemental 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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP