FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #	P93000003299	(3)
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VIDEO PRODUCTIONS, INC.

Principal Place of Business	Mailing Address
3568 WOODCLIFF DR CRESTVIEW FL 32539	P OBOX 725 CRESTVIEW FL 32536-0725



I US	US US				
		•		3. Date Incorporated or Qualified	3a. Date of Last Report
				01/11/1993	06/07/1995
2. Principal Place of		2a. Mailing Address		4. FEI Number	Applied For
	NTON AVE	26 172 TRENT	ON AVE	59-3160896	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		o. Commodic of Citatos Boshod	Fee Required
City & State	EW FLORIDA	City & State	FLORIDA	6. Election Campaign Financing	\$5.00 May Be
23 CRESTVI		28 CREST VIEW		Trust Fund Contribution	Added to Fees
Zp 3 2 5 39	Country 25	^{Zip} 32539 3	Country	8. This corporation has liability for in Florida Statutes Yes	
9, 1	Name and Address of Current	Registered Agent	. [10. Name and Address of New Ro	egistered Agent
			81 Name		
WHITLOCK, L	LICIEN W JR		20 01 11	/D.O. D. M. L. T. M. A. L. L.	
3568 WOODO				ess (P.O. Box Number is Not Acceptable TRENTON AVE	e)
CRESTVIEW F			83	The Entire No.	
			84 Gity 4 =		
				STVIEW	FL 85 Zip Code 32.539
11. Pursuant to the p	provisions of Sections 607,0502	and £07.1508, Florida Statutes, t	the above-named corpora	ation submits this statement for the purp d of directors. I hereby accept the appo	oose of changing its registered office
tamiliar with, and	i accept the obligations of, Section	in 607.0505, Florida Statutes.			writment as registered agent, i am
SIGNATURE &	usin W Whither a typed or printed name of registereri agent a	1 LucieN	W . WIHITLO Registered Agent signature required	CI JR X	Pril 28 1996
· · · · · · · · · · · · · · · · · · ·					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
	HTI COL LI LOUTA IN ID	☐ DELETE	1. 1 TITLE		
I	HITLOCK, LUCIEN W. JR		1.2 NAME		
1	68 WOODCLIFF DR			22 TRENTON AVI	~
	restview fl			RESTVIEW FLOR	· · · · · · · · · · · · · · · · · · ·
THILE S		☐ DELETE	2 1 TITLE		🔀 Change 🔲 Addition
	HITLOCK, MARIE		2.2 NAME	_	
	68 WOODCLIFF DR		23 STREET ADDRESS /2		
	restview fl		24 CHY-ST-ZIP C. F	RESTYLEW FLORI	PH 32539
TITLE		☐ DELETE	3 1 THILE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-SI-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		☐ DELETE	6. 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		·

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this arruval 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: Lucion W Whillief & Lucion W. WHITLOCK JR. Apr 28, 1996 (904)682-5775

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Desprese Prices

CR2E034 (12/95)