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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	OSA PUBLISHING COMPANY	U20010 (3) ', INC.) 		
Principal Plac	ce of Business	Mailing Address						
301 N MAIN STREET CRESTVIEW FL 32536		P.O. BOX 2099 LAKE CITY FL 32056-2099 US	•					
		00			3. Date incorporated or Qualified	I	Date of Last R	teport
9 Principal C	Place of Business	2a. Mailing Address			03/12/1993 4. FEI Number	L_03	/08/1996	
21	INCO OF DOSITIOSS	26 Maining Address			59-3183009			oplied For ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired		\$8.75	Additional	
City & Sta	le	27 City & State			6. Election Campaign Financing			oquired May Be
23		28			Trust Fund Contribution			to Fees
Zip 24	Country 25	Zip 29	Country 30		This corporation has liability for Florida Statutes	r intangibl		. 199.032,
	9. Name and Address of Current				10. Name and Address of New F	legistered	Agent	
YOU	JNG, MANTHA A		81 Na	ime				
ROUTE 4 BOX 140-B JASPER FL 32052			82 Street Addr		ess (P.O. Box Number is Not Acceptable)			
JAS			83					
	All Control of the Control		84 Cit	 .y			85 Zip (Code
44 Durange	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and CO7 4600 Florida Chat.	ton the charge par		ocation a harita this statement for the	17	- laboraine il	
agent. I a SIGNATURE	an familiar with, and accept the obligation of t	t and title if applicable. (NO	orida Statules. IL: Registered Agent sig	rature require	ed wice reinstalling) ADDITIONS/CHANGES TO OFF	DATE ICERS AN	ID DIRECTOF	RS IN 12
TITLE	PD	☐ DELETE	1.1 THE				Change	Addition
NAME	KNUDSEN, JIM		1.2 NAVE					
STREET ADDRESS	301 N MAIN ST		1.3 STREET ADDR	ESS				
CITY-ST-ZIP TITLE	CRESTVIEW FL	DELETE	2.1 HILE				Change	Addition
NAME	HAMILTON, SHERRY	L	2.2 NAME				LL Similar	
STREET ADDRESS	301 NORTH MAIN STREET		2.3 STREET ADDR	ESS				
CITY-ST-ZIP	CRESTVIEW FL		2. 4 CI1Y-ST-2(f	,				
TITLE	STD	DELETE	3.1 TITLE				Change	Addition
NAME	YOUNG, MANTHA		3.2 NAME.					
STREET ADDRESS	301 N MAIN ST		3.3 STREET ADDR					
CITY-ST-ZIP	CRESTVIEW FL	DELETE	3.4. CITY - ST - 7(f	·		•	Change	Addition
NAME	RICKESTON, LYNNETTE	LJ DER R	4 1 THLE 4 2 NAME				onango	[_] Noutron
STREET ADDRESS	301 N MAIN ST		4.3 \$18EE1 ADDR	iss				
CITY-ST-ZIP	CRESTVIEW FL		4.4 CITY - ST - ZIP					
TITLE	D	DELETE	5.1 1111				Change	Addition
NAME	HILL, JIM		5.2 NAME					
STREET ADDRESS	301 N MAIN ST		5.3 STRELT ADDR	ESS				
CITY-ST-ZIP	CRESTVIEW FL		5.4 CITY-S1-7IP				- T-1 a	
TITLE		☐ DEFETE	61 117tF				L_ Change	Addition
NAME			6.2 NAME	100				
STREET ADDRESS			6.3 STREET ADDR	192				

CHY-S1-ZIP

14. I do horeby 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 the 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 directed of office 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 Bl

FILED

Apr 02 1997 8:00am

Secretary of State