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

FILED

May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra S. Northing Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000030807 (0) 1. Corporation Name HOME AND FAMILY PUBLISHERS, INC.			
Principal Place of Business Royal Palm Towers III 1600 S. Dixie Hwy, Ste 5AB Boca Raton, FL 33432		Mailing Address SAME	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		3. Date Incorporated or Qualified 04/26/93 4. FEI Number 65-0443432 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	
8. Name and Address of Current Registered Agent RANDALL, CHARLES P. Royal Palm Towers III 1600 S. Dixie Hwy, Ste 5AB Boca Raton, FL 33432		9. Name and Address of New Registered Agent 91 Name 92 Street Address (P.O. Box Number is Not Acceptable) 93 City 94 FL 95 Zip Code	
10. Pursuant to the provisions of Sections 607.0602 and 607.1606, Florida Statutes, the above-named corporation submits the 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 607.0605, Florida Statutes.			
SIGNATURE _____ (Signature, Name or printed name of registered agent and state if applicable) (NOTE: Registered agent signature required when terminating) DATE _____			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
10.1 TITLE P ☐ DELETE 10.2 NAME HOSKINS, BOB 10.3 STREET ADDRESS 576 VIA VERONA 10.4 CITY-STATE-ZIP DEERFIELD BEACH, FL 33443	11.1 TITLE ☐ Change ☐ Addition 11.2 NAME ☐ Change ☐ Addition 11.3 STREET ADDRESS ☐ Change ☐ Addition 11.4 CITY-STATE-ZIP ☐ Change ☐ Addition	12.1 TITLE ☐ Change ☐ Addition 12.2 NAME ☐ Change ☐ Addition 12.3 STREET ADDRESS ☐ Change ☐ Addition 12.4 CITY-STATE-ZIP ☐ Change ☐ Addition	
10.5 TITLE VP ☐ DELETE 10.6 NAME HOSKINS, ROBERT D. 10.7 STREET ADDRESS 5201 NE 14th TERRACE, APT. 2 10.8 CITY-STATE-ZIP FT. LAUDERDALE, FL 33334	11.5 TITLE ☐ Change ☐ Addition 11.6 NAME ☐ Change ☐ Addition 11.7 STREET ADDRESS ☐ Change ☐ Addition 11.8 CITY-STATE-ZIP ☐ Change ☐ Addition	12.5 TITLE ☐ Change ☐ Addition 12.6 NAME ☐ Change ☐ Addition 12.7 STREET ADDRESS ☐ Change ☐ Addition 12.8 CITY-STATE-ZIP ☐ Change ☐ Addition	
10.9 TITLE ☐ DELETE 10.10 NAME ☐ DELETE 10.11 STREET ADDRESS ☐ DELETE 10.12 CITY-STATE-ZIP ☐ DELETE	11.9 TITLE ☐ Change ☐ Addition 11.10 NAME ☐ Change ☐ Addition 11.11 STREET ADDRESS ☐ Change ☐ Addition 11.12 CITY-STATE-ZIP ☐ Change ☐ Addition	12.9 TITLE ☐ Change ☐ Addition 12.10 NAME ☐ Change ☐ Addition 12.11 STREET ADDRESS ☐ Change ☐ Addition 12.12 CITY-STATE-ZIP ☐ Change ☐ Addition	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(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. 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: B. D. Hoskins BOB HOSKINS, PRESIDENT April 30, 1998			

CPE2034 (10/97)