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PROFIT CORPORATION ANNUAL REPORT

appears in Block 12 or Block 13

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000040541 (3)

ADVANCE MEDIA, INCORPORATED

	GE MEDIA, INCOHPORATE											
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195 S WESTM Suite K	ionte dr		ox 162164 Onte springs fl	32716-21	64		1					
ALTAMONTE S	SPRINGS FL 32714						L				D	_
us			-				1	 Date Incorporated or Quali 06/09/1993 		ate of Last	•	
2. Principal F	Place of Business	2a. Ma	iling Address		•		+	4. FEI Number		30/1996	Applied For	\dashv
21		26	26					59-3195926		J	Not Applicabl	le
Suite, Apt	#, etc	Sui	te, Apt. #, etc.					5. Certificate of Status Desire	о 🗆		Additional	
22	······································	27									Required	_
City & Sta	ite:	28	y & State				- '	Election Campaign Financial Trust Fund Contribution	ng 🖂		O May Be I to Fees	ı
Ζφ.	Country	Zip		Cou	intry	· · · · · · · · · · · · · · · · · · ·	+;	This corporation has liabilit				
24	25	29		30	•			Florida Statutes	Yes		8, 199,002,	
	9. Name and Address of Curr		d Agent				1	0. Name and Address of Ne	w Registered	Agent		
ZOTTNECK, SCOTT W					81	Name						
202 MAJESTIC OAK DR					82	Street Add	dress	(P.O. Box Number is Not Acc	eptable)			\neg
ALT	AMONTE SPRINGS FL 32714				83							_{-
					03							
					84	City			FL	85 Zig	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1	508, Florida Statu	tes, the a	bove	e-named cor	rporal	tion submits this statement for		f changing	its registere	a
office or	t to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	ite of Florida. Singetions of Se	Such change was action 607 0505. Fi	authorize	d by	the corpora	ation's	s board of directors. I hereby	accept the app	oointment a	is registered	1
SIGNATURE.	city of the transfer of the open	·gantonio en ca	011011 20110020,11	01.00								Ì
	Signature, typed or printed name of registered a				d Age	ant signature requ	uired wh	<u> </u>	DATE			
12.	T	ND DIRECTO	RS DELETE	13.				ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTO		<u>8</u>
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6.4 City-SI-7/P
 14. I do hereby certify that the information supplied with this filling 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 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