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

PROFIT CORPORATION ANNUAL REPORT

1998

The state of the s

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000060635 (8)

PUBLICATIONS CONSULTANTS, INC.

れるか、家具電子ラインの からかからでんとなるとなり Principal Place of Business Mailing Address 781 CAXAMBAS DRIVE MARCO ISLAND FL 33837 781 CAXAMBAS DRIVE MARCO ISLAND FL 33837 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0433459 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intagerble 24 25 29 30 Personal Property Tax due June 30. ☐ Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GUILFOIL**, PAUL J 225 N.E. EIGHTH AVENUE ₿2 Street Address (P.O. Box Number is Not Acceptable) OCALA FL 34470 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 1/11/6 Change Addition NAME MILLER, DAVID M 1.2 NAME %781 CAXAMBAS DRIVE STREET ADDRESS 1.3 STREET ADDRESS MARCO ISLAND FL CITY-ST-24P 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition **CENTRACCHIO, JUDITH** NAME 22 NAME %781 CAXAMBAS DRIVE STREET ADDRESS 2.3 STREET ADDRESS **Mar**co Island Fl CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME SILVER, BERNARD 3.2 NAME STREET ADDRESS %781 CAXAMBAS DRIVE 3.3 STREET ADDRESS MARCO ISLAND FL CITY-ST-29P 3.4. CITY-ST-ZIP DELETE Change 4 1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-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

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 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

DELETE

7/7/ax 941 384 497 3

Change

Addition

FILED

Feb 06 1998 8:00am

Secretary of State