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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000062751 (1) **DOCUMENT** #

THE SHERIDAN GROUP, INC.

FILED Apr 21 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				
11382 PROSPERITY FARMS RD 228 A PALM BCH GARDENS FL 33410	11382 PROSPERITY FARMS RD 228 A PALM BCH GARDENS FL 33440 US		DO NOT WRITE IN TH	IIS SPACE
US			3. Date Incorporated or Qualified 09/09/1993	
2. Principal Place of Businesso Keech. Lee	2a. Mailing Address	0.1. /	4. FEI Number	Applied For
21 - 6080 Blvd.	26 6080 OKeech.Le	e Blvd.	65-0441742	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 201	Suite, Apt. #, etc.	701	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State Palm Beach	City & State West Palm	Beach	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33417 Country USA	29 33417 30	US A	8. This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
BUTTE, JOHN T 8531 BEACONHILL RD. PALM BEACH GARDENS FL 33410		81 Name 82 Street Addre	B_0H_E , J_0H_N T_0 ass (P.O. Box Number is Not Acceptable)	
		83 //863	Wimbledon Circle	# 519
	1 1	elling tow F	L 85 Zip Code 33414	
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation 	l Herida. Such change was authorize	ed by the corporation	oration submits this slatement for the purpose on's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE				

Signature, typed or printed name of registered agent and the if applicable (NOTE Flogistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE BUTTE, JOHN T NAME 1.2 NAME 11863 Wimbledon Circle # 519 232 COCOANUT ROW STREET ADDRESS 1.3 STREET ADDRESS Wellington, Fl PALM BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DECETE TITLE Change 2.1 TITLE Addition BUTTE, JOHN T. NAME 2.2 NAME 232 COCOANUT ROW STREET ADDRESS 2.3 STREET ADDRESS PALM BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 41 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 3UILE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 2IP DELETE Change ___ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as regardled by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachroent

5(1) 688 - 7925