## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996

P93000067423 (2)

WPB COMMUNICATIONS, INC.

Principal Place of Business 2835 S.W. BRIGHTON WAY PALM CITY FL 34990

DOCUMENT #

Mailing Address

2835 S.W. BRIGHTON WAY PALM CITY FL 34990



				09/28/1993	04/28/1995	
2. Principal Place of Business		2a, Mailing Addres	35	4. FEI Number 65-05	Applied For	
i]		26		NOT APPLICABLE	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. # 6	etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		Oity & State		Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees	
Z <sub>IP</sub>	Country 25	Ζφ <b>29</b>	Country  8. This corporation has liability for intangible tax under s. 199.032,  Florida Statutes Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
			81 Name			
CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301			82 Street	82 Street Address (P.O. Box Number is Not Acceptable) 83		
			83			
		_	84 City		FL 85 Zip Code	
	U	OCOO and COVE \$500. Elondo	Chat doe the above remaid of	concention out mits this etaborated for the rule	moeu of chancing its registered office.	

on, Such change was authorized by the corporation's hoard of directors. Thereby accept the appointment as registered agent, fam. on 607.0505, Florida Statutes. or registered age

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTOR 13. 12. ☐ Change ☐ Addition 1 1 TITLE TITLE VERMILLION, RICHARD 1.2 NAMÉ NAME 2835 SW BRIGHTON WAY 1.3 STREET ADDRESS STREET ADDRESS PALM CITY FL 4 CHY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2 1 TITLE PTSD TITLE MORTON, PERRY W 2.2 NAME NAME 2835 SW BRIGHTON WAY 2.3 STREET ADDRESS STREET ADDRESS PALM CITY FL 2.4 CITY - ST - ZIP CITY - ST - ZIP ☐ Change Addition TITLE DELETE 3 1 HILF MARKSTEINER, GUENTER 3.2 NAME NAME 2835 SW BRIGHTON WAY 3.3 STREET ADDRESS STREET ADDRESS PALM CITY FL 3 4 City ST-ZiP CITY-ST-ZIP ☐ Change ☐ Add∂tion DELETE 4 1 111116 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.C(TY - ST - Z-P) CITY-SI-ZIP Change ☐ Addition DELFTE 5 \* TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP C-TY-ST-Z-P

6.4 C:TY -ST-7IP CITY-ST-ZIP 14. If do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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

6 1 TITLE

6.2 NAME

6.3 STHEET ADDRESS

TITLE

NAME STREET ADDRESS

IN Moston PERRY W. MORTON 4/2496 407-287-05/2

DELETE.

Change |

Addition

CR2E034 (12/95)