5-1-98 B-16173 C 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

DOCUMENT #

P93000079529 (2)

LINDA'S PUB. INC.

FILED May 01 1998 8:00am Secretary of State

LINDA'S PUB, INC.				
Principal Place of Business	Mailing Address		f na neinder eid laten eiter antet aneit derer adritt sen	in inint mille state that that
1521 NORTH U.S. HWY. 1	1521 NORTH U.S. HWY, 1		j	
ORMOND BEACH FL 32174	ORMOND BEACH FL 32174			
			DO NOT WRITE IN THIS	SPACE
			3. Date incorporated or Qualified	
			11/17/1993	
2. Principal Place of Business	2a. Mailing Address	and od	4. FEI Number	Applied For
21 1040 S. NOVA Rd	26 /040 S. AL	777714	59-3210544	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		<u> </u>	Fee Required
23 ORMOND Barch, Fl.	28 ORMOND A	meh, Pl.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country Wast 4	B. This corporation owes or has paid the cut	rent year Intangible
24 32174 25 VOLUSIA	29 32174 3	o Wearra	Personal Property Tax due June 30.	Yes No
g, Name and Address of Current	Registered Agent		10. Name and Address of New Registered	
BRITT, LINDA	· · · · · · · · · · · · · · · · · · ·	81 Name		
1521 NORTH HIGHWAY U.S. 1		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
ORMOND BEACH FL 32174		10	10 S. NOVA RE	
		83		
		84 City	MOND Bend, Pl. FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607 1508, Florida Statutes	, the above-named c	orporation submits this statement for the purpose o	changing its registered
office or registered agent, or both, in the State of agent. I am firming with, and accept the obliga	of Florida. Such change was aut	thorized by the corno	pration's board of directors. I hereby accept the app	pointment as registered
	TOTAL COSCULTATION	da otatoles.	4/-	-10-4
SIGNATURE Signature, typied or printed name of registered agen	Land life if applicable (NOTE: I	Registered Agent signature re	equired when reinstalting) GATE	5/98
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	D DIRECTORS IN 12
TITLE P	DELETE	1.1 TITLE		☐ Change ☐ Addition ♀
NAME DOLAN, MICHAEL B.		1.2 NAME		3
STREET ADDRESS 285 FIR ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP ORMOND BEACH FL		1.4 CITY - ST - ZIP		ָבֶּן מַּ
TITLE VP	DELETE	2.1 TITLE		Change Addition
NAME BRITT, LINDA	-	22 NAME	. .	
STREET ADDRESS 1521 NORTH U.S. HWY 1		2.3 STREET ADDRESS	1640 S. NOVA RE	_
CITY-ST-ZIP ORMOND BEACH FL.		2. 4 CITY-ST-ZIP	1640 E. Nova Rd On move Acash, Fl-32 174	
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		ŀ
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	41 TITLE		Change Addition
NAME	—	4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		İ
		B		1
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME	occur	5.2 NAME		Change Radiion
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-\$T-ZIP	DELETE	5.4 CiTY - ST - ZiP		Change Addition
TITLE	F-7 DEFEIG	61 TITLE		L CHRUSE L AUDITION
NAME		6.2 NAME		ļ
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-\$1-ZIP	h thur filing door not qualify for	6.4 CITY-ST-ZIP	in Section 110.07/9Vi) Florida Statutas 1 further as	artify that the information
. • • cometry certify men diff microsition supplied Wil				

1 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.

CICNIATURE

P. I. B. ++

4/25/98 904/121-9935