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

P93000087706 (6) DOCUMENT #

GOLD MINE MAGAZINE, INC.

Principal Place of Business

Mailing Address

FILED May 13 1998 8:00am Secretary of State



704 S. TYNDALL PARKWAY 704 S. TYNDALL PARKWAY PANAMA CITY FL 32404 PANAMA CITY FL 32404 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/27/1993 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-3332148 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 8. This corporation owes or has paid the current year Intenglible Zip Zip. Country Country ☐ Yes 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name COLONEL. HORACE L 704 S. TYNDALL PARKWAY Street Address (P.O. Box Number is Not Acceptable) 82 PANAMA CITY FL 32404 83 84 City 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 (NOTF: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition TITLE 1.1 TITLE **COLONEL, HORACE L** NAME 1.2 NAME 704 S. TYNDAL PARKWAY 1.3 STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32404 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETÉ Addition ☐ Change D TITLE 21 TITLE THOMAS, AHNDREW NAME 2.2 NAME **5415 INDIANPIPE STREET** STREET ADDRESS 2.3 STREET ADDRESS SAN ANTONIO TX 78242 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34. CITY - ST- ZIP DELETE Change Addition 41 TITLE TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - ST- ZIP CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE 52 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - 7IP DELETE Change Addition TITLE 61 TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CFLY - ST - ZIP 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.