FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 27 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000088483 (1)**

1. Corporation Name
GOLD MINE PUBLICATIONS AND MAGAZINES, INCORPORATED

Principal Place of Business	Mailing Address
245 S.W. HOLLYWOOD BLVD., #4 FT. WALTON BEACH FL 32548	245 S.W. HOLLYWOOD BLVD., #4 FT. WALTON BEACH FL 32548

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/28/1993
3a. Date of Last Report: 10/10/1994

2. Principal Place of Business	2a. Mailing Address
21 24 S.W. Hollywood Blvd # 4	26 24 S.W. Hollywood Blvd # 4
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Ft Walton Bch, Fl. 32548	28 City & State: SAME
24 Zip: 32548 25 County	29 Zip 30 County

4. FEI Number: 59-2782574 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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
KIMREY, ROBERT L 245 S.W. HOLLYWOOD BLVD., #4 FT. WALTON BEACH FL 32548	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 24 S.W. Hollywood # 4 83 84 City: Ft. Walton Bch, Fl. FL 85 Zip Code: 32548

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 _____ DATE
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	D	11 TITLE	☑ Change ☐ Addition	
NAME	KIMREY, ROBERT L	12 NAME		
STREET ADDRESS	151 S MARY ESTHER BLVD	13 STREET ADDRESS	24 S.W. Hollywood Blvd # 4	
CITY-ST-ZIP	MARY ESTHER FL 32569	14 CITY-ST-ZIP	Ft Walton Bch, Fl. 32548	
TITLE	D	21 TITLE	☑ Change ☐ Addition	
NAME	KIMREY, DEBBIE S	22 NAME		
STREET ADDRESS	151 S MARY ESTHER BLVD	23 STREET ADDRESS	24 S.W. Hollywood Blvd # 4	
CITY-ST-ZIP	MARY ESTHER FL 32569	24 CITY-ST-ZIP	Ft Walton Bch, Fl. 32548	
TITLE	D	31 TITLE	☐ Change ☐ Addition	
NAME	KIMREY, WILLIAM T	32 NAME		
STREET ADDRESS	501 DAVIS ST	33 STREET ADDRESS		
CITY-ST-ZIP	BURLINGTON NC 27215	34 CITY-ST-ZIP		
TITLE	D	41 TITLE	☐ Change ☐ Addition	
NAME	KIMREY, FRANCES S	42 NAME		
STREET ADDRESS	501 DAVIS ST	43 STREET ADDRESS		
CITY-ST-ZIP	BURLINGTON NC 27215	44 CITY-ST-ZIP		
TITLE		51 TITLE	☐ Change ☐ Addition	
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE	☐ Change ☐ Addition	
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Robert L. Kimrey 3-20-95 904 244-0446
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0300785 CP