

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

MAY 17 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000009642 (7)

1. Corporation Name

THE LEGAL SOFTWARE PUBLISHING COMPANY, INC.

Principal Place of Business

**5715 JOHNSON ST.
HOLLYWOOD FL 33021**

Mailing Address

**5715 JOHNSON ST.
HOLLYWOOD FL 33021**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/07/1994

3a. Date of Last Report

2. Principal Place of Business

21
Suite Apt # etc.

2b. Mailing Address

26
Suite Apt # etc.

4. FEI Number
65-0549476

Applied For
Not Applicable

23. City & State

27. City & State

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

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.01(2)(c) and 607.15(4)(b), 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

PRESIDENT
CHARLES FLAXMAN
3651 N 32ND AVE
HOLLYWOOD, FL 33021
VICE PRES / SEC / TREAS
JAY C HELL
115 NW 133RD
PLANTATION, FL 33325

13. ADDITIONAL NAMES TO OFFICERS AND DIRECTORS ONLY

NAME
STREET ADDRESS
CITY & STATE
NAME
STREET ADDRESS
CITY & STATE
NAME
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1. NAME
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10. NAME
11. STREET ADDRESS
12. CITY & STATE
13. NAME
14. STREET ADDRESS
15. CITY & STATE
16. NAME
17. STREET ADDRESS
18. CITY & STATE
19. NAME
20. STREET ADDRESS
21. CITY & STATE

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption against disclosure under the Florida Statutes. I further certify that the information included 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 liquidator thereof to cause this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of Chapter 607 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/95

308-489-8212