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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Sep 17 1998 8:00am Secretary of State

DIVISION OF CORPORATIONS 1998 DOCUMENT # P94000040107 (2) JOE STEWART COMMUNICATIONS, INC. Principal Place of Business Mailing Address 1430 E CALL ST 1430 E CALL ST STARKE FL 32091 STARKE FL 32091 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1994 2. Principal Place of Business 2a. Mailing Address 4 FEL Number Applied For 59-3245056 Not Applicable 21 Suite, Apt #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROWN, ARLINE 1430 E CALL ST Street Address (P.O. Box Number is Not Acceptable) STARKE FL 32091 83 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, typed or printed name of registered agent and title if applicable, (NOT): Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE 1.1 10118 STEWART, WALTER J NAME 1.2 NAME 1430 EAST CALL STREET STREET ADDRESS 1.3 STREET ADDRESS STARKE FL 32091 CITY-ST-ZIP 1.4 CITY-\$1-ZIP DELETE Change Addition HILE 2111111 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2.4 City-St-7iP CITY - \$1 - 76 DELETE Change Addition TILLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - 7IP 3 4. City - S1 - ZIP DELETE Change Addition TITLE 4.1 THLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIF 5.4 C(1Y-S1-Z)P DELETE Change Addition THUE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS C(TY - S1 - 7)E

14. Thereby 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.

SIGNATURE

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CENTROS (10/97)