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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 01 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000041057 (8)

ROY PUBLISHING SYSTEMS, INC.

HOT PUI	blioning ototemo, inc.					
Principal Plac	e of Business	Mailing Address	·		-	<u> Louis espățistăți dosta pirki îbot 1001</u>
431 EGRET AVE NAPLES FL 33963		P.O. BOX 8926 NAPLES FL 34101-8926				
					3. Date Incorporated or Qualified 05/26/1994	3a. Date of Last Report 05/31/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26 1661 Trac	de Con	to lighy	65-0496037	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		27 Sin te 2 City & State		<u> </u>	Fee Required	
_ - '			· E	1.3/1	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 Zip	Country	28 NAPITS	Countr	VICTIF	Trust Fund Contribution	
24 34	108 25	29 34109	30 65	A	8. This corporation has liability for i	Nangible tax under s. 199.032, Yes No
<u>~ </u>	9. Name and Address of Current				10. Name and Address of New Reg	
ROY	, DAVID J		81	Name		
431 EGRET AVE			82	Ctroot Addro	ess (P.O. Box Number is Not Acceptab	(a)
	LES FL 33963		62	Sireel Addre	iss (P,O: Box Number is Not Acceptab	10)
			83			
						Int 7: Oak
			84	City		FL 12/11/18
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligate	and 607.1508, Florida Statut of Florida. Such change was ions of, Section 607.0505, Flo	les, the above authorized borida Statule	re-named corporations.	oration submits this statement for the pon's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered agen			ent signature require		DATE
12.	OFFICERS AND	DELETE	13.	— 	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	ROY, DAVID J	□ berrie	1.1 TITLE			Change L Addition
NAME OTOTET ADDRESS	431 EGRET AVE		1.2 NAME			
STREET ADDRESS	NAPLES FL 33963			T ADDRESS		34108
CITY-\$T-ZIP TITLE	11/4 020 1 0 0000	DELETE	1.4 CITY - 2.1 TITLE	SI-ZIP		Change Addition
NAME			2.2 NAME			C ontaining
STREET ADDRESS						
CITY-ST-ZIP			1	1 ADDRESS		
TITLE		DELETE	2. 4 CITY - 3.1 TITLE	31-211		Change Addition
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS	-	
CITY-ST-ZIP			3.4. CITY-			
TITLE		DELETE	4.1 TITLE	<u></u>		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP	•		4.4 CITY-			
TITLE	,	DELETE	51 TITLE			Change Addition
NAME			5 2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY -	\$1-7IP		i
TITLE		DELETE	G.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREE	1 ADDRESS		

14. I do hereby certify that the information supplied with this filling 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 trusted 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 juddress.

6.4 C/TY - ST - Z/P