FILED

Feb 20, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000045205

NORTH FLORIDA WEB PRESS, INC.									
Principal Place of Business Mailing Address							# #188 6 # 111 8	4 14 0 14 10 4 0 4 6 414 (60 4	
5164 SHAWLAND ROAD JACKSONVILLE FL 32254 JACKSONVILLE FL 32254									
US JACKSONVILLE FL 32254 US JACKSONVILLE FL 32254 US						DO NOT WRITE IN THE STATE			
		-				DO NOT WRITE IN THI 3. Date Incorporated or Qualifed	S SPACE	<u> </u>	
						- 06/09/1994 -			
	Place of Business	2a. Mailing Address	·			4. FEI Number		1	
21		26				59-3249666		Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$9.7	Not Applicable 75 Additional	
22 27						5. Certifcate of Status Desired		e Required	
City & St	ate	City & State	City & State		6. Election Campaign Financing				
23		28				Trust Fund Contribution		00 May Be led to Fees	
Zip	Country	Zip	Coun	ntry		8. This corporation owes the current year Ir		160 10 1-862	
24	25	29	30			Personal Property Tax.	Yes	□No	
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Registered			
SM	ITH, D. LAMAR			81 N	lame				
6200 SOUTHPOINT DR., SUITE 210 JACKSONVILLE FL 32216			1	82 S	treet Addre	ess (P.O. Box Number is Not Acceptable)		 -	
				-		(1.0. Box Number is Not Acceptable)			
0,10	MOONVILLE I L J2210		8	83					
				84 C	it.				
				1. 1		FI	85 Z	Zip Code	
office or	t to the provisions of Sections 607. register	0502 and 607.1508, Florida Statut	es, the abo	ove-na	med corpo	ration submits this statement for the purpose of n's board of directors. I hereby accept the appoint	changing	its registered	
agent. I a	am fersiliar hish arja accept this co	lig fons of, Section 607.0505, Flo	rida Statute	es.	corporation	n's board of directors. I hereby accept the appoint	ntment as	registered	
SIGNATUR						*			
12.	ure, twend or printed name of registered			gent sigr	ature required s	when reinstating) DATE	_	 ,	
TITLE	D OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	TORS IN 12	
NAME	WALSH, RICHARD G		1.1 TITLE		ĺ		Chang	ge Addition	
STREET ADDRESS	1		1.2 NAME	E	ļ				
CITY-ST-ZIP	ORANGE PARK FL		1.3 STRE	ET ADD	RESS			}	
TITLE	OTANGE FANK FL		1.4 CITY-					}	
NAME		☐ DELETE	2.1 TITLE	<u>:</u>		· · · · · · · · · · · · · · · · · · ·	Change	ge Addition	
STREET ADDRESS			2.2 NAME				•	-	
CITY-ST-ZIP			2.3 STREE	ETADO	RESS			į	
TITLE				2.4 CITY-ST-ZIP					
NAME		☐ DELETE		3.1 TITLE		-	Change	e Addition	
STREET ADDRESS			3.2 NAME		1				
CITY-ST-ZIP			3.3 STREE	ET ADDR	ESS				
TITLE			3.4. CITY-	ST-ZIP				ſ	
NAME		☐ DELETE	4.1 TITLE				Change	e Addition	
STREET ADDRESS			4. 2 NAME	•		·			
			4.3 STREE	T ADDR	ESS			ł	
CITY-ST-ZIP TITLE			4.4 CITY-S	ST-ZIP	_				
NAME		☐ DELETE	5.1 TITLE				☐ Change	Addition	
STREET ADDRESS			5.2 NAME					ł	
			5.3 STREE		≣ss∤			}	
TITLE			5.4 CITY-S	ST-ZIP					
NAME		☐ DELETE	6.1 TITLE				☐ Change	Addition	
			6.2 NAME					_	
STREET ADDRESS			63 STREET	TADDO	ee l			- 4	

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 Block 12 or Block 13 if charged, or on an abachinent with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP