

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra R. Montano  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **P94000047379 (0)**

1. Corporation Name

**COMPUTER PUBLISHING GROUP, INC.**

95 MAY -1 PM 10:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

6641 PERCH RD.  
NAVARRE FL 32566

Mailing Address

6641 PERCH RD.  
NAVARRE FL 32566

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

06/20/1994

3a. Date of Last Report

2. Principal Place of Business

21 6904 NAVARRE PKWY.

2a. Mailing Address

26 Suite, Apt. # etc.

22 Suite, Apt. # etc.

C

27 Suite, Apt. # etc.

23 City & State

NAVARRE FL

28 City & State

29 City & State

24 Zip

32566

25 Country

USA

29 Zip

30 Country

4. FEI Number

59-3851855

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. 190.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

KEMP, SANDRA F  
6641 PERCH RD.  
NAVARRE FL 32566

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 607.0402 and 607.1504, 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. Each 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

Sandra F. Kemp

Sandra F. Kemp

30 April '95

12. OFFICERS AND DIRECTORS

TITLE: PRESIDENT  
NAME: SANDRA F. KEMP  
STREET ADDRESS: 6641 PERCH RD.  
CITY, ST, ZIP: NAVARRE, FL 32566

TITLE: VICE-PRESIDENT  
NAME: JOHN T. KEMP  
STREET ADDRESS: 6641 PERCH RD.  
CITY, ST, ZIP: NAVARRE, FL 32566

TITLE: SECRETARY  
NAME: SANDRA F. KEMP  
STREET ADDRESS: 6641 PERCH RD.  
CITY, ST, ZIP: NAVARRE, FL 32566

TITLE: TREASURER  
NAME: JOHN T. KEMP  
STREET ADDRESS: 6641 PERCH RD.  
CITY, ST, ZIP: NAVARRE, FL 32566

TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:

TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: Change Addition  
2. NAME: Change Addition  
3. STREET ADDRESS: Change Addition  
4. CITY, ST, ZIP: Change Addition

5. TITLE: Change Addition  
6. NAME: Change Addition  
7. STREET ADDRESS: Change Addition  
8. CITY, ST, ZIP: Change Addition

9. TITLE: Change Addition  
10. NAME: Change Addition  
11. STREET ADDRESS: Change Addition  
12. CITY, ST, ZIP: Change Addition

13. TITLE: Change Addition  
14. NAME: Change Addition  
15. STREET ADDRESS: Change Addition  
16. CITY, ST, ZIP: Change Addition

17. TITLE: Change Addition  
18. NAME: Change Addition  
19. STREET ADDRESS: Change Addition  
20. CITY, ST, ZIP: Change Addition

21. TITLE: Change Addition  
22. NAME: Change Addition  
23. STREET ADDRESS: Change Addition  
24. CITY, ST, ZIP: Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that it qualifies for the exemption stated in Section 119.07(3)(b), 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 liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or as an attachment with an address.

SIGNATURE:

Sandra F. Kemp

Sandra F. Kemp

30 April '95

904.989-1900