FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and

tam an officer or director of the corporation or the receiver appears in Place 12 or Block 13 if changed/or on an attack.

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the courate and that my signature shall have the same legal effect as if made under oath; that xecute this report as required by Chapter 607, Florida Statutes; and that my name

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000051824 (8)

PROFESSIONAL PUBLICATIONS, INC.

Principal Place of Business Mailing Address 829 CUMBERLAND ST. 829 CUMBERLAND ST. LAKELAND FL 33801 LAKELAND FL 33801-5510 3. Date Incorporated or Qualified 3a. Date of Last Report 07/13/1994 08/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3290287 Not Applicable 21 26 Suite, Apt. #, etc. Suite Ant. # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Z_{1D} 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 Florida Statutes 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CRAVEN. WESLEY A 829 CUMBERLAND ST. Street Address (P.O. Box Number is Not Acceptable) **LAKELAND FL 33801** 83 City Zip Code 907.0502 and 607.1508, Florida Statutes, the above hamed corporation submits this statement for the purpose of changing its registered be State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered he obligations of Section 607.055, Florida Statutes. Pursuant to the provisions of Sections office or registered agont, or both, in SIGNATURE d title if applicable signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE 1.1 TITLE Change Addition 3011.8 CRAVEN, WESLEY A 1.2 NAME NAME **829 CUMBERLAND STREET** 1.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 33801 1.4 CITY-\$7-ZIP CHY-ST-ZIE Change Addition DELETE 2.1 TITLE TOTAL HALLOWAY, JAMES B 2 2 NAME NAME 5064 HAYES ROAD 2.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 33811 2.4 City-St-ZiP CITY - ST - ZIP DELETE 3.1 TITLE Change Change Addition 11111 PENNACHIO, JOHN 3.2 NAME NAME 217 ECHO PINES WAY STREET ADDRESS 3.3 STREET ADDRESS **LAKELAND FL 33813** CHY-ST ZIP 3.4. CITY - \$T - ZIP Change Addition DELETE 4.1 TITLE THEFE LASSITER, HUBERT E 4.2 NAME NAME **521 ARIANA STREET** STREET ADDRESS 4.3 STREET ADDRESS LAKELAND FL 33803 CHY-ST-ZIP 4.4 CUTY - ST - ZIP Change Addition DELETE TITLE 5.1 T 5.2 N ME NAME REET ADDRESS STREET ADDRESS 5.3 \$ Y-ST-ZIP CITY: ST. ZIP 5.40 Change Addition DELETE TITLE 6.1 NAME 6.2 I FET ADDRESS STREET ADORESS CITY-ST-ZIF

or trustee empowered to