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

PROFIT CORPORATION **ANNUAL REPORT**

1998

DUNWOODY, ALICE 305 SW 140TH TERRACE

NEWBERRY FL 32669



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000057007 (4)

DOING IT RIGHT PUBLICATIONS, INC. Principal Place of Business Mailing Address 305 SW 140TH TERR 305 SW 140TH TERR NEWBERRY FL 32669 NEWBERRY FL 32669 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/02/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 23-2452100 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6, Election Campaign Financing 23 Trust Fund Contribution Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent

FILED Feb 27 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Not Applicable

			84 City		FL 85 Zip C	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 appointment agent agent. I am appointment agent agent agent agent agent agent agent agent agent. I am appointment agent age						
SIGNATURE (NOTE: Registered Agent signature required when reliebishing) DATE::						
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFIC		S IN 12
TITLE	TSP	DELETE	1.1 TITLE		☐ Change	Addition
NAME	DUNWOODY, GERARD D	~ ~	1.2 NAME			
STREET ADDRESS	13818 NW MILLHOPPER RD.		1.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL 3265.		1.4 CITY - ST - ZIP			
TITLE	TSP	☐ DELETE	2.1 TITLE	PCEO	Change	Addition
NAME	DUNWOODY, ALICE		2.2 NAME	100	•	
STREET ADDRESS	13818 NW MILLHOPPER RO.		2.3 STREET ADDRESS			•
ÇITY-ST-ZIP	GAINESVILLE FL 32809		2. 4 CITY - ST - ZIP			ł
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3 4, CITY - ST - ZIP			
TITLE		☐ DELE T E	4.1 TITLE		Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
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 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 that god, or on a rettachment with an address.						

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Street Address (P.O. Box Number is Not Acceptable)