

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Meltran
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000058085 (9)**

1. Corporation Name

TARGET PUBLICATIONS, INC.



Principal Place of Business

124 NORTH COVE DR.
PONTE VEDRA BEACH FL 32082
US

Mailing Address

P.O BOX 433
POTE VEDRA BEACH FL 32004-0433
US

2. Principal Place of Business

2a. Mailing Address

State, Apt. #, etc.

26 State, Apt. #, etc.

City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

YOUNG, DOUGLAS
124 NORTH COVE DRIVE
SUITE A
PONTE VEDRA BEACH FL 32082

3. Date Incorporated or Qualified

08/02/1994

3a. Date of Last Report

04/17/1995

4. FEI Number

59-3261249

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

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 607.0901 and 607.1506, 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 familiar with, and accept the obligations of, Section 607.0905, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1 NAME	D	<input type="checkbox"/> DELETED
12.2 NAME	YOUNG, DOUGLAS M.	
12.3 STREET ADDRESS	124 N. COVE DRIVE	
12.4 CITY, ST, ZIP	PONTE VEDRA BEACH FL	
12.5 TITLE	D	<input type="checkbox"/> DELETED
12.6 NAME	YOUNG, JOHNATHAN	
12.7 STREET ADDRESS	124 N. COVE DRIVE	
12.8 CITY, ST, ZIP	PONTE VEDRA BEACH FL	
12.9 TITLE		<input type="checkbox"/> DELETED
12.10 NAME		
12.11 STREET ADDRESS		
12.12 CITY, ST, ZIP		
12.13 TITLE		<input type="checkbox"/> DELETED
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY, ST, ZIP		
12.17 TITLE		<input type="checkbox"/> DELETED
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 TITLE	
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9 TITLE	
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13 TITLE	
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 190.07(3)(k), 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. I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jonathan D. Young

1-24-96

904-246-7377

CR2E034 (12/95)