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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000064362 (4)

| FLORIDA DIRECTORY PUBLISHING, INC. | | | | į | |
|---|--|-----------------------|----------------------------------|--|--------------------------------------|
| | | | | i Pagijari dia 1874 andi Albij Abiji Abiji abiji abiji abiji abiji | |
| Delegate at Dis- | - (0) | AA-Ni-a- A dal | | | |
| | e of Business | Mailing Address | | | • |
| 490 FIRST AVE. 8. 490 FIRST AVE. S. 51. PETERSBURG FL 33701 C/O ANDREW CORTY | | | | | |
| | | ST. PETERSBURG FL 337 | 01 | DO NOT WRITE IN THIS SPACE | |
| | | US | • | 3. Date Incorporated or Qualified | |
| | | | | 08/31/1994 | |
| 2, Principal Place of Business 2a. Mailing Address | | | 4. FEI Number | Applied For | |
| 21 26 | | | 65-0516712 | Not Applicable | |
| Sulte, Apt. #, etc. Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| 22 | | City & State | | | <u>-</u> |
| — | | 28 | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip Country | | 7ip | Country | 8. This corporation owes or has paid th | |
| 24 | 25 | | 30 | Personal Property Tax due June 30. | Yes No |
| | 9, Name and Address of Curren | | | 10. Name and Address of New Registe | ered Agent |
| RAHDERT, GEORGE K | | | 81 Name | | |
| 535 CENTRAL AVENUE | | | 82 Street A | ddress (P.O. Box Number is Not Acceptable) | |
| ST. PETERSBURG FL 33701 | | | 000171 | | |
| | · • - · · · · · · · · · · · · · · · · · | | 83 | | |
| | | | 84 City | | 85 Zip 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 register 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |
| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | appointment as registered |
| SIGNATURE | <u>:</u> | | | | |
| | Signature, typod or printed name of registered age | | Registered Agent signature re | | ATE |
| 12. TITLE | OFFICERS AN | D DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTORS IN 12 Change Addition |
| NAME | CORTY, ANDREW P | | 1 | | Charge Character |
| | 490 1ST AVE SOUTH | | 1.2 NAME | | |
| STREET ADDRESS | ST. PETERSBURG FL 33701 | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | n | DELETE | 1.4 CHY-ST-ZIP 21 TITLE | | Change Addition |
| NAME | ROALES, JUDITH | | 2.2 NAME | | |
| STREET ADDRESS | 490 FIRST AVE. S. | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | ST. PETERSBURG FL | | 2. 4 CITY - S1 - ZIP | | |
| TITLE | STD | DELETE | 3.1 TITLE | | Change Addition |
| NAME | KARL, KATHERINE | | 3.2 NAME | KARL, CATHERINE | Const Connex |
| STREET ADDRESS | 490 FIRST AVENUE SOUTH | | 3.3 STREET ADDRESS | , | (Specing man) |
| CITY-ST-ZIP | ST. PETERSBURG FL 33701 | | 3.4. CITY-ST-ZIP | | • |
| TITLE | D | ☐ DELETE | 4.1 TITLE | | Change Addition |
| NAME | Barnes, andrew e | | 4. 2 NAME | | |
| STREET ADDRESS | 490 FIRST AVENUE SOUTH | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | ST. PETERSBURG FL 33701 | | 4.4 CITY - ST - ZIP | | |
| TITLE | D | DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | MARTIN, SUSAN T | | 5.2 NAME | | |
| STREET ADDRESS | 490 FIRST AVENUE SOUTH | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | ST. PETERSBURG FL 33701 | | 5.4 CITY-ST-ZIP | | |
| TITLE | D | DELETE | 61 TITLE | | Change Addition |
| NAME | REEVES, RICHARD F | | 6.2 NAME | | |
| STREET ADDRESS | 49 0 FIRST AVENUE SOUTH | | 6.3 STREET ADDRESS | | |

ST. PETERSBURG FL 33701

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 changed or on an attachment with an address.

FILED

Jan 30 1998 8:00am

Secretary of State