## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P94000070895

FT. MYERS, FL 33931

**Entity Name: SEAGATE PUBLISHING COMPANY** 

Apr 26, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2337 KINGS LAKE BLVD 1909 FAIRFAX CIRCLE NAPLES, FL 34112 NAPLES, FL 34109 **Current Mailing Address: New Mailing Address:** P.O. BOX 11911 NAPLES, FL 341011911 US FEI Number: 65-0631260 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SALVATORI, LEO J FOSTER, JR., GALE D PRES 1909 FAIRFAX CIRCLE 4501 TAMIAMI TRAIL NORTH NAPLES, FL 34109 SUITE 300 NAPLES, FL 339403060 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: GALE DEAN FOSTER, JR. 04/26/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition FOSTER, G D Name: Name: 2337 KINGS LAKE BLVD Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: VΡ Title: ( ) Delete () Change () Addition Name: KREUSER, WILLIAM G Name: 1025 N. WATERWAY DRIVE Address: Address: FT. MYERS, FL 33919 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition SPEIRN-SMITH, DOUGLAS H Name: Name: 414 CRESCENT STREET Address: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: GALE DEAN FOSTER, JR. **PRES** 04/26/2002