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

PROFIT CORPORATION ANNUAL REPORT



FLOR/DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000071257 (7)

EL TAL	LER PUBLISHING COMP.	ANY Mailing Address			
1277 TALLEVAST RD. SARASOTA FL 34243 US		1277 TALLEVAST RD. SARASOTA FL 34243 US			
				 Date Incorporated or Qualified 09/28/1994 	3a. Date of Last Report 05/22/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number 59-3269627	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29]	Country 30	8. This corporation has liability for Florida Statutes Yes	FINo.
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New I	Registered Agent
1275 BA	i, adam g NCHORY UN DTA FL 34237			PCRF ress (P.O. Box Number is Not Acceptal	FL 85 7in Code
SIGNATURE	Signature, typied or printed name of registered agr		is, the above-named corporation's boat by the corporation's boat it. It: Registed Apoil signal increquire. 13.	ration submits this statement for the purif of directors. I hereby accept the appoint of which religious when religious to OFF ADDITIONS/CHANGES TO OFF	DATE
TITLE	PT	☐ DELETE	1. 1 TITLE		Change Addition
NAME	SEGRETI, ADAM G		1.2 NAME		
STREET ADDRESS	1275 BANCHORY LN		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34237 VS	F) proper	1.4 CITY - \$1 - 2IP		
TITLE NAME	SEGRETI, BETH A	DELETE	2 1 TITLE		Change Addition
STREET ADDRESS	1275 BANCHORY LN		2.2 NAME 2.3 STREET ADDRESS		
CHY-SI-ZIP	SARASOTA FL 34237		2.4 City - St - Zip		
TITLE		DELETE	3. 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-7IP		Filescie	3.4 C(TY - ST - Z(P		
TITLE		DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY - ST - ZIP 5 1 TITLE		Change Addition
NAME			5.2 NAME	A COCOCO 4 CO	
STREET ADDRESS			5.3 STREET ADDRESS	4000018 3 -05/24/96010	720004
CITY-ST-ZIP			5.4 CITY - ST- ZIP	***200,00	JJO UUT
TITLE		DELETE	6. 1 TITLE	***************************************	Change Addition
NAME		the state of the s	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST- ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 logal effect as if miade 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 cranged, or of an attachment with an address.

SIGNATURE:

(941) 358-9933