

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000071931

1. Corporation Name

FOX MARKETING GROUP, INC.

Principal Place of Business

1825 TARPON LANE
H-102
VERO BEACH FL 32960

Mailing Address

1825 TARPON LANE
H-102
VERO BEACH FL 32960

2. Principal Place of Business

21 4460 HODGES BLVD

2a. Mailing Address

26 4460 HODGES BLVD

Suite, Apt. #, etc.

22 # 906

Suite, Apt. #, etc.

27 # 906

City & State

23 JACKSONVILLE FL

City & State

28 JACKSONVILLE, FL

Zip

24 32224

Country

25 USA

Zip

29 32224

Country

30 USA

9. Name and Address of Current Registered Agent

O'NEILL, EUGENE
979 BEACH LAND BLVD.
VERO BEACH FL 32963

3. Date Incorporated or Qualified

09/29/1994

4. FEI Number

65-0528452

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 owes the current year Intangible
Personal Property Tax. ☐ 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 607.0502 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME FOX, CHARLES B
STREET ADDRESS 1825 TARPON LANE, H-102
CITY-ST-ZIP VERO BEACH FL 32960

TITLE PD ☐ DELETE

NAME FOX, CHARLES B.
STREET ADDRESS 1825 TARPON LANE, H-102
CITY-ST-ZIP VERO BEACH FL

TITLE STD ☒ DELETE

NAME FOX, GAIL B.
STREET ADDRESS 1825 TARPON LANE, H-102
CITY-ST-ZIP VERO BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/99 (904) 821-0338
Date Daytime Phone #

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90009 018 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)