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FILED

Feb 05 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000091801 (8)

1. Corporation Name

LONG FORM ADVERTISING CORPORATION

Principal Place of Business

133-44 GOLF CREST CIRCLE  
TAMPA FL 33624

Mailing Address

133-44 GOLF CREST CIRCLE  
TAMPA FL 33624



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1994

4. FEI Number

59-3295627

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 or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 3030 ROCKY POINT DR. WEST

2a. Mailing Address

25 3030 N. ROCKY POINT DR. WEST

22 Suite, Apt. #, etc.

280

Suite, Apt. #, etc.

27 SUITE 280

23 City & State

TAMPA FL

City & State

28 TAMPA FL

24 Zip

33607

Country

25 U.S.A.

Zip

29 33607

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

JOSEPH P. BURNS  
13344 GOLF CREST CIR  
TAMPA FL 33624

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 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

*Joseph P. Burns*

(NOTE: Registered Agent signature required when reinstating)

1/29/98

DATE

12. OFFICERS AND DIRECTORS

TITLE *PD Pres* ☐ DELETE

NAME BURNS, JOSEPH P  
STREET ADDRESS 13344 GOLF CREST CIRCLE  
CITY-ST-ZIP TAMPA FL 33624

TITLE *VP* ☐ DELETE

NAME *Kristi Davison*  
STREET ADDRESS *3030 Rocky Point Dr.*  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
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.

SIGNATURE:

*Joseph P. Burns*

1/29/98

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