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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF S₹ATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000022502 (5)

INTERMART BROADCASTING WEST COAST, INC.



4810 DELTONA DRIVE PUNTA GORDA FL 33950			4810 DELTONA DRIVE PUNTA GORDA FL 33950					
					3. Date Incorporated or Qualified 03/20/1995	3a. D	Date of Last Re	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number	<u></u>	⊢	oplied For
:1		26			65.0564031	7	——— <u>—</u>	lot Applicable
Suite, Apt. #	I, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	[]	•	Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	<u> </u>	Added	May Be ito Fees
Zip	Country	Ziρ	Coun	try	8. This corporation has liability for	or intangibl es [] No		199.032,
24	25	29	30		Florida Statutes Y			
	9. Name and Address of Cu	irrent Registered Agent		31 Name				
EIEODO.	DATINOLA C		Ĺ	$+\mathcal{D}\mathcal{C}_{\prime}$		<u> </u>		
	, PATRICIÁ S		1	Street A	Address (P.O. Box Number is Not Accept	able)		
4810 DELTONA DRIVE PUNTA GORDA FL 33950			11	B3				
IONIA	COMPATE COSCO						06 7	Code
				B4 City			-L	
11. Pursuants	o the provisions of Sections 607.	0502 and 607.1508, Florida State	utes, the abov	e-named co	propration submits this statement for the placed of directors. I hereby accept the a	ourpose of	changing its r	egistered office
or registere	ed agent, or both, in the State of th, and accept the obligations of,	Florida, Such change was author Section 607 0505. Florida Statute	rized by the co es	orporation's	board of directors. I hereby accept the a	ppointrnen	t as registered	agent, ram
IST. LINION AND	in, title adoption of	Control (O) 100000, 1 tollan outside				,	41221	96.
	Lattering C	-, FJV YYF						
SIGNATURE _	Signature, typed or printed name of registered	agent and the if applicable (i)	NOTE: Registered	Agent signature r	vowed when renstating	DAT		·
SIGNATURE _	Signature, typed or printed name of registered	S AND DIRECTORS	NOTE: Registered /	Agent signature r	coursed when reinstating) ADDITIONS/CHANGES TO C	DAT FFICERS A		
_	Signature, typed or printed name of registered OFFICERS	· og.···· · · · · · · · · · · · · · · · · ·				DAT FFICERS A	AND DIRECTO	RS IN 12
12.	Signature, typed or printed name of registered OFFICERS D MARTIN, JAMES E	S AND DIRECTORS	13.	LE		DAT FFTCERS A		
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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 furnished and that the information in scated 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 disanged or on an extractingly with an address.

PATRICIA S. DAHLIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-639-1188