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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000024513 (0)

POLYMEDIA, INC.

 FILED
Apr 21 1997 8:00am
Secretary of State

Principal Place	of Business	Mailing Address			1 IOO INDEN HID EDERF OFFILE OORRE OORSE OORSE	H BOSSO HON OSTOR	SHEH HIS) 	
1155 LOUISIAN	IA AVE	1155 LOUISIANA AVE							
101	C1 69700	101 Winter Park FL 32789-	9951						
WINTER PARK US	LF 95109	US	2991		3. Date Incorporated or Qualified	3. Date Incorporated or Qualified 3a. Date of Last Report			
					03/28/1995	04/30/	1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number			plied For	
21		26			59-3319563			t Applicable	
Sulte, Apt	W, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 A Fee Red	dditional	
22 City & State	· · · · · · · · · · · · · · · · · · ·	City & State			6 Flatin Committee Figure 1			· · · · · · · · · · · · · · · · · · ·	
23	3	28			Election Campaign Financing Trust Fund Contribution		5.00 t Added to		
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for				
24	25	29	30	_		Yes XN			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Ager	ıl		
ENG	NEUKE, BRYAN L			81 Name 7	Name From ROYON I				
	1 BROCKTON WAY		-	82 Street A	ddress (P.O. Box Number is Not Acceptat	ole)			
TÁL	LAHASSEE FL 32312				155 LOUISIANA AVI	<u> 5. </u>	,		
				83 5	SUITE 101				
			ľ	04		E4 85	Zip Ç	ode	
4. 6	40-0707070707070707070707070707070707070	and COZ 45 OO Florido Ciato	too the of	V V	DINTER PARK orporation submits this statement for the p	FL Surpose of obs	noing its	707	
Affice or re	anistered enent or both in the State o	of Florida, Such channa was	authorized	t hy the carbo	pration's board of directors. I hereby acce	ot the appointr	nont as r	registered	
	m familiar with, and accept the obligation	A			1	1-15-9	7		
SIGNATURE (Signature, typyd og mitted name of ogiste ud agen	it and title if applicable (NO	TE Registered	Agent signature re	equired when reinstating)	DATE	<i>1</i>		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC				
TITLE	P	☐ DELETE	1.1 10	LF		L	Change	Addition	
NAME	ENGELKE, DAVID H		1.2 NA	ME					
STREET ADDRESS	661 ST JOHNS CT		1.3 S1	REET ADDRESS					
CITY-ST-ZIP	WINTER PARK FL 32792	Dourte		Y-ST-ZIP		I	Change	Addition	
TITLE	ST CHOCKE DOVANI	☐ DELETE	2.1 TH	!		Α.	Charigo	☐ Yaqıtıdır	
NAME	ENGELKE, BRYAN L 8151 BROCKTON WAY		2.2 N/	3	5005 MAUI CIRCLE				
STREET ADDRESS	TALLAHASSEE FL 32312				orlando, FL 3280)SI			
CITY-\$T-ZIP TITLE	D	DELETE	3.1 TII		JAH 110- 1 - CO CC		Change	Addition	
NAME	JOSEPH M TENCZAR		3.2 N/						
STREET ADDRESS	897 WOODGATE TRAIL		3.3 \$1	REFT ADDRESS					
CITY-ST-ZIP	LONGWOOD FL		3.4. C	TY-ST-ZIP					
TITLE		DELETE	4,1 11	LE			Change	☐ Addition	
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 S1	REET ADDRESS					
CITY-ST-ZIP		·····		IY-S1-7IP		· · · · · · · · · · · · · · · · · · ·			
TITLE		☐ DELETE	5.1 TO			LJ	Change	Addition	
NAME			5.2 NA	1					
STREET ADDRESS			- 8	REET ADDRESS					
CITY-ST-ZIP		☐ DELETE		IY-ST-ZIP		—— <u>—</u>	Change	Addition	
TITLE		□ nertig	6.1 TI			L.J	∿uπuÅ ₀	radikon	
TWOTIL	l se		6.2 N/	RFE1 ADDRESS					
STREET ADDRESS CITY-ST-ZIP				IY-S1-ZIP					
UIT-91-4P			0 4 01	11 01 411					

14. To 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 attack tent with an address.

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