

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sergeant Major
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000034242 (4)

1. Corporation Name

PALM BEACH PUBLISHING GROUP, INC.



Principal Place of Business

**101 SEABREEZE AVENUE
DELRAY BEACH FL 33483**

Mailing Address

**101 SEABREEZE AVENUE
DELRAY BEACH FL 33483**

2. Principal Place of Business

21 100 N.E. 5TH AVENUE

State, Apt. No., etc.

22 DELRAY BEACH, FL

City & State

23

24 33483

Zip

Country

25 USA

2a. Mailing Address

26 100 N.E. 5TH AVENUE

State, Apt. No., etc.

27 DELRAY BEACH, FL

City & State

28

29 33483

Zip

Country

30 USA

9. Name and Address of Current Registered Agent

**MINTER, DAVID L
101 SEABREEZE AVENUE
DELRAY BEACH FL 33483**

3. Date Incorporated or Our Next

04/18/1995

3a. Date of Last Report

4. FEI Number

65-0588124

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 has liability for intangible tax under s. 193.032
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**81 MINTER, DAVID L
82 Street Address (P.O. Box Number is Not Acceptable)
204 N.W. 11TH ST.
83
84 City DELRAY BEACH FL 85 Zip Code 33444**

11. Pursuant to the provisions of Sections 609.02 and 609.03, Florida Statutes, the above named corporation, as described, the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, has been duly adopted by the corporation and the officers and directors of the corporation have signed and accepted the appointment as registered agent. I am further willing and accept the obligations of Sections 609.02 and 609.03, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	[] DELETED
NAME	MINTER, DAVID L	
STREET ADDRESS	204 N.W. 11TH ST.	
CITY, ST, ZIP	DELRAY BEACH FL 33444	
TITLE	STD	[] DELETED
NAME	VANCE, BLAKE E	
STREET ADDRESS	204 N.W. 11TH ST.	
CITY, ST, ZIP	DELRAY BEACH FL 33444	
TITLE		[] DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] DELETED
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE		[] Change [] Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE	STD	[x] Change [] Addition
NAME	VANCE, BLAKE E.	
STREET ADDRESS	101 SEABREEZE AVENUE	
CITY, ST, ZIP	DELRAY BEACH, FL 33483	
TITLE		[] Change [] Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] Change [] Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied herein is true and correct, furnished and does not violate the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information is true and correct as required by the provisions of the law and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the person authorized to provide the information herein and have received by Chapter 609, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attached schedule.

SIGNATURE: Blake E. Vance, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/96 407 276 0252

CR2E034 (12/95)