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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000077823 (9)

DODGE GROUP COMMUNICATIONS, INC.

Principal Place of Business Mailing Address 18610 MISTY LAKE DRIVE PO ROX 577 JUPITER FL 33468-0577 JUPITER FL 33458 3. Date Incorporated or Qualified 3a. Date of Last Report 10/11/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0614947 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Ζip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DODGE, DAVID W 18610 MISTY LAKE DRIVE Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33458 83 City 84 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 Signifier typical or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSTD DELETE 1.1 TITLE Change Addition TITLE DODGE, DAVID W 1.2 NAME NAME 18610 MISTY LAKE DRIVE 1.3 STREET ADDRESS STREET ADDRESS JUPITER FL 33458 CITY - \$1 - 76 1.4 CITY - ST - ZIP Addition DELETE Change THUE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS Crty - St - Zrf 2.4 CITY-ST-ZIP

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64 CHTY-ST-ZIP CHY-ST-ZIP 14. I do 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 angual 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 of frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 hment with an address.

SIGNATURE:

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Secretary of State

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