

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000093581 (3)

1. Corporation Name

VANGUARD INTERNET PAGES, INC.



Principal Place of Business

15210 AMBERLY DR APT 631
TAMPA FL 33647

Mailing Address

15210 AMBERLY DR APT 631
TAMPA FL 33647

3. Date Incorporated or Qualified

12/07/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 11330 Olive Blvd. ~~St. Louis~~

26 Suite, Apt. #, etc.

22 106

27 City & State

23 St. Louis MO ~~63106~~

28 Zip

24 63141

25 Country

USA

29 Zip

30 Country

4. FEI Number

59-3352057

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. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GUARD, THOMAS W
15210 AMBERLY DR APT 631
TAMPA FL 33647

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 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

Thomas W. Guard

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME David S. Guard
STREET ADDRESS 128 Ladue Oaks Dr
CITY-ST-ZIP St. Louis, MO 63141

TITLE ☐ DELETE

NAME Elizabeth Guard
STREET ADDRESS 128 Ladue Oaks Dr
CITY-ST-ZIP St. Louis MO 63141

TITLE ☐ DELETE

NAME James S. Guard
STREET ADDRESS 516 Fairways Cir
CITY-ST-ZIP Creve Coeur, MO 63141

TITLE ☐ DELETE

NAME Melanie J Guard
STREET ADDRESS 516 Fairways Cir
CITY-ST-ZIP Creve Coeur, MO 63141

TITLE ☐ DELETE

NAME Peter J Guard
STREET ADDRESS P.O. 1205 Meadowrest Dr
CITY-ST-ZIP Valrico FL 33594

TITLE ☐ DELETE

NAME Thomas W. Guard
STREET ADDRESS 15210 Amberly Dr Apt 631
CITY-ST-ZIP Tampa FL 33647

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. 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 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:

Thomas W. Guard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96
DATE

979-0651
Daytime Phone #

CR2E034 (12/95)