SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE 华ROFIT FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 96 SEP -6 AM 9: 50 DIVISION OF CORPORATIONS 1996 P9600000480 (9) **DOCUMENT #** SECRETARY OF STATE TALLAHASSEE, FLORIDA MURPHY MEDIA & COMPANY, INC. Principal Place of Business Mailing Address 1901 S. HARBOR CITY BLVD 1901 S. HARBOR CITY BLVD SUITE 633 SUITE 633 3a. Date of Last Report MELBOURNE FL 32901 MELBOURNE FL 32901 3. Date incorporated or Qualified 12/26/1995 4. FEI Nuceber Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt #, etc Suite, Apt #, etc. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes Y No. Country Zip Country 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MURPHY, PETER J Street Address (P.O. Box Number is Not Acceptable) 1901 S. HARBOR CITY BOULEVARD SUITE 633 83 MELBOURNE FL 32901 85 Zip Code 84 City 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 nereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. (NOTE Registered Agont signature required when remotating): DAYs Signature Typed or principles to of rejestered agent and title Lapple, told ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8) OFFICERS AND DIRECTORS 12. Change Add-bon 1.1 HILE TITLE PRESIDENT PETER J. MURPHY. BLID STE 683 CR2E034 1.2 NAM NAME 1.3 STREET ADDRESS STREET ADDRESS MELBOURNE, FL. 3290 DELETE 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition 2.1 TITLE TITLE 800001957228 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST-ZIP CITY-ST-ZIP DELETE 3 1 TITLE 3 2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIF Change Addition DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 51 HILE TITLE 5.2 NAME NAME 5 3 STREET ACCRESS STREET ADORESS 5 4 City - St - ZiP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS primation supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I in 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 a fried for bit the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and the properties of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and the properties of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and the properties of the corporation of the corpora CITY-ST-ZIP 14. I do hereby certify that the information further certify that the information made under oath; that I am an other my name appears in Block

SIGNATURE:

0016353

407-777-1997