## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE: X



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600007011 (5)

CROSS-COUNTRY MEDIA, INC.

Principal Place of Business 8525 SOUTH HIGHWAY 441 LEESBURG FL 34788		Mailing Address 8525 SOUTH HIGHWAY 441 LEESBURG FL 34788		1 PERIENT IN THE SILVE OF FREE SEA	2011  2011  1071  2010  1120  1101 1001
				3. Date Incorporated or Qualified 01/23/1996	3a. Date of Last Report
· ·	Place of Business	2a. Mailing Adgress		4. FEI Number	Applied For
Suite, Apt #, etc.		26 <b>P. O. Box 490326</b> Suite, Apt #, etc.		59-3354513	CO 75
22		27		5. Certificate of Status Desired Fee Required	
City & State	е	City & State  28 CEESBUSE	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip 2/4 - 12/4	Country	8. This corporation has liability for	
24	25 9. Name and Address of Curren	29 J 7/7 V7/6	30 CISA	Florida Statutes  10. Name and Address of New R	Yes No
THE	LAW FIRM OF LAWRENCE J SP		81 Name		agisteren waant
343 /	almeria avenue	EGE OINTD	$ \bot$ $\bot$ $\bot$ $\bot$ .	ess (P.O. Box Number is Not Accepta	ble)
CORAL GABLES FL 33134				5 5 HWY 44)	
					Test 7:a Codo
			84 City (ff)	iber 6	FL B5 ZDCOGA
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both in the State	2 and 697.1508, Florida Statut	es, the above-named corp	oration submits this statement for the	purpose of changing its registered
office or r agent. La	registered agent, or both in the State on familiar with, and accept me oblig	ntions , Seat 1 607 0505, Fi	authorized by the corporationida Statutes.	ion's board of directors. I hereby acce	opt the appointment as registered
SIGNATURE	1 1/1/			n. sh	///7/4/
12.	Signature Typed or printing or in of registered age		F Registered Agent signature require  13.	ed when reinstating)  ADDITIONS/CHANGES TO OFF	DATE CORS IN 12
TITLE	PD	DELETE	1 1 TITLE	Applitotojonaraco io ovi	Change Addition
NAME	GRIFFIN, C. V JR.		12 NAME		
STREET ADDRESS	8525 SOUTH HIGHWAY 441		13 STREET ADDRESS		
CITY-ST-7iP	LEESBURG FL 34788		1.4 CITY - ST - ZIP		
TITLE	STD	☐ DELETE	21 TITLE		Change Addition
NAME	MILLER, E. F JR.		2 2 NAME		
STREET ADORESS	8525 SOUTH HIGHWAY 441		2.3 STREET ADDRESS		
CITY-ST-7IP TITLE	LEESBURG FL 34788	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	DUANE, JOHN P JR.	- Proces	3.2 NAME		Company Comment
STREET ADDRESS	8525 SOUTH HIGHWAY 441		3.3 STREET ADDRESS		
City-St-2if	LEESBURG FL 34788		34. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
\$TREET ADDRESS			4.3 STREET ADDRESS		
C-TY-ST-ZIF		DELETE	4.4 CHY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change    Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		Parties	62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY -ST-7F			6.4 CITY-ST-ZIP		
14 Ldo boro	by certify that the information supplie	d with this filing does not qual-	fu for the exemption states	in Section 119.07(3)(i), Florida Statut	es. I further certify that the
Information I am an o appears i	on indicated on this armual report or softicer or director of the corporation of in Block 12 or Block 13 if changed, o	supplemental annual report is to the ceretyer or traitee propour in an action on with an ad-	true and accurate and that vered to execute this repor dress.	I my signature shall have the same leg rt as required by Chapter 607, Florida	jal effect as if made under path; that Statutes; and that my name