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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000009789**1. Corporation Name

GREAT PLANET PUBLISHING, INC.

					- I (BERIGE) (IB IBIID BRIII BRIII GARRI BRIII ARIII	SELLS LEVIL LER	9: 10:12 :01: 1001
Principal Place of Business Mailing Address							
		5257 WISTERIA COURT			Ļ		
CAPE CORAL FL 33904		CAPE CORAL FL 33904		DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualifed		
					01/29/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21 26				65-0639138		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additiona		Additional	
22					5. Certificate of Status Desired Fee Required		
City & State City & State					6. Election Campaign Financing	\$5.00	0 May Be
23		28		Trust Fund Contribution Added to Fees		to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year In	tangible	_,_
24	25 29 30		ן		Personal Property Tax.	Property Tax. ☐ Yes ☑ No	
1	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
NEVINS, JOEL			82	Stroot Add	Iress (P.O. Box Number is Not Acceptable)		
5257 WISTERIA COURT			02	Sueer Add	iless (r.,O, box rigiliber is not necopiable)		
CAPE CORAL FL 33904			83	 -			
						105 7:	Code
			84	City	· FI	85 Zip	o Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes,	the abov	e-named con	poration submits this statement for the purpose o	f changing i	ts registered
office or r	anietored agent or both in the State	e of Florida. Such change was auth	ionzed by	the corporat	ion's board of directors. I hereby accept the appo	intment as	registered
agent. 1 a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florida	a Statutes	.			1
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Re	gistered Age	nt signature requir	ed when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE	D DELETE		1.1 TITLE			Change	e 🔲 Addition
NAME	NEVINS, JOEL		1.2 NAME				}
STREET ADDRESS	5257 WISTERIA COURT		1.3 STREE	T ADDRESS			1
CITY-ST-ZIP	CAPE CORAL FL 33904		1.4 CITY-S				1
TITLE			2.1 TITLE			☐ Change	e 🔲 Addition
NAME	NEVINS, ELLEN		2.2 NAME		•		ſ
	5257 WISTERIA COURT			T ADDRESS			
STREET ADDRESS	CAPE CORAL FL 33904		1	ST-ZIP	سراعيان محافظة سنينين عصريات الأالى المنايات		J
CITY-ST-ZIP =	CARE CORNE PL 33304	□ DELETE	3.1 TITLE	√1-∠II		Change	e 🔲 Addition
NAME		<u> </u>	3.2 NAME	Ī			-
			8	T ADDRESS			}
STREET ADDRESS			3.4. CITY-				Ì
CITY-ST-ZIP		□ DELETE	4.1 TITLE	01-ZIF		Change	e 🗍 Addition
TITLE		OFFE	4.1 TILLE 4.2 NAME				
NAME			ı				į
STREET ADDRESS				T ADDRESS			\
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	st-ZIP		Change	e Addition
TITLE		[] pere ie	5.1 TITLE 5.2 NAME		•		- (
NAME				T ADDRESS			
STREET ADDRESS	{						ĺ
CITY OF 7ID	I		5.4 CITY-5	51-4P [

14. I 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 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

JOEI NEVINS

DELETE

941-945-0210

Addition

Change

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90221 024 ***150.00