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PROFIT CORPORATION ANNUAL REPORT

1997



LORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🙏 Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #/P96000022212 (0)

EAU GALLIE PUBLISHING, INC.

Mailing Address

FILED Feb 03 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address				
3653 PALOMINO RD. MELBOURNE FL 32934		\$653 PALOMINO RD. MELBOURNE FL 32934-8152				
				3. Date Incorporated or Qualified 03/08/1996	3a. Date of Last F	eport
2. Principal P	Place of Business	2a. Mailing Address		4. FELNumber		oplied For
21		26		59-3372204	No.	ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #. etc.		5. Certificate of Status Desired		Additional
22		City & State	· · · · · · · · · · · · · · · · · · ·	100		equired
City & Stat	e	⊢ı ′		Election Campaign Financing Trust Fund Contribution		May Be to Fees
23 Zip	Country	28	Country	8. This corporation has liability for		
24	25	29	30		Yes X No	. 100.002,
124	9. Name and Address of Curre		1001	10. Name and Address of New Re		
-3656 -MEL	JAK, MICHAEL- 3 PALOMINO RD. BOURNE FL 32034		83 84 City /	diess (P.O. Box Number is Not Accepted Rect h Harber	Cly Dlv4 FL ⁸⁵ 多	59°35′
office or in agent. I a	Styreauth typed or published new too' registered a	Talles .	s authorized by the corpora Florida Statutes. IOIE: Registered Agent signature requ 13.	rporation submits this statement for the pation's board of directors. I hereby acceured when reinstating) ADDITIONS/CHANGES TO OFFICE	13.97 DATE	
HILE	I D	DELETE	11 TITLE		☐ Change	Addition
NAME	CULJAK, MICHAEL		1 2 NAME		•	
STREET ACCRESS	3653 PALOMINO RD.		1.3 STREET ADDRESS			
CHTY - SI - ZIP	MELBOURNE FL 32934		1.4 CITY-ST-ZIP			
TITLE	D	DELETE	2 1 TITLE		☐ Change	Addition
NAME	CULJAK, MARION		2.2 NAME			
STREET ADDRESS	3653 PALOMINO RD.		2.3 STREET ADDRESS			
CITY-ST-ZIP	MELBOURNE FL 32934		2.4 CITY-ST-ZIP			
TOLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS	1		3.3 STREET ADDRESS			
DITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	CoifibbA
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
City-St-ZiP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADORESS			5.3 STREET ADDRESS			
CITY-ST-ZIF			5.4 CITY - ST - ZIP			
TITLE	1	DELETE	6.1 TITLE		☐ Change	Addition
NAME.			6 2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-719			64 CITY-ST-ZIP			
01 1 - 31 - 21"	1		040111-01-71			

14. I do hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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.