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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000026034

1. Corporation Name

Beinging Blood of Business

EXCALIBUR PRESS, INC.

rnncipal riac	e oi business	Mailing Address					
3512 BERGER ROAD LUTZ FL 33549-4759 LUTZ FL 33549-4759							
					DO NOT WRITE IN THIS SF	DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed		
					03/19/1996		41.01
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21 1329 WELSH RUN RD 26 1329 WELSH RU			RUN RI	)	59-3365825		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional
22		27				- :	Required
City & Star		City & State				T	May Be -
=~1	RSVILLE, VA	28 RUCKERSVILLE, VA Zip Country			Trust Fund Contribution		to Fees
Zip	Country	Zip		•	8. This corporation owes the current year Intang	gible ∐Yes	□No
24 22968·		29 22968-2745	30 G	REENE	Personal Property Tax.  10. Name and Address of New Registered Ag		
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registered Ag	jent.	
SHC	ORT, ROBERT J JR.				HOLAS T. SIMONIC		
3512 BERGER ROAD				82 Street A	ddress (P.O. Box Number is Not Acceptable)		
LUTZ FL 33549-4759				83	PERIMETER PARK BLVD.		
LOT	216 30343-4739			03			
				84 City			Code
				JACK	SONVILLE FL		2216-634
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State (	2 and 607.1508, Florida Statu of Florida. Such change was a	tes, the a authorized	ove-named c by the corpor	orporation submits this statement for the purpose of chation's board of directors. I hereby accept the appointm	nent as r	egistered
agent. I a	arn familiar with, and accept the obligat	tions of, Section 607.0505, Flo	orida Stati	ites.	ration's board of directors. I hereby accept the appointm	a	_
SIGNATURE	- Willelia 7.	Smorn			42/9	7	
45	Signature, prod or printed name of registered agen	· · · · · · · · · · · · · · · · · · ·	E: Registered	Agent signature rec	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12
12.	OFFICERS AND DIRECTORS  PD □ DELETE		1.1 TI	1F		Change	
	SHORT, ROBERT J JR		1.2 N				
NAME	ACIA DEDOCED DOAD				1329 WELSH RUN RD		
STREET ADDRESS					RUCKERSVILLE, VA 22968-2745		
CITY-ST-ZIP TITLE	00.0.000		2.1 TI			Change	Addition
	SHORT, ELAINE		2.2 N				
NAME	ACCOUNT OUT TO SELECT			REET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP	OAKTON VA 22124	□ DELETE	2.4 C	TY-ST-ZIP		Change	Addition
			3.2 N		•	_	_
NAME				ME REET ADORESS			
STREET ADDRESS	5			-			
CITY-ST-ZIP		☐ DELETÉ	3.4. C	TY-ST-ZIP	ſ	Change	Addition
TITLE			4.1 II 4, 2 N				
NAME				i			
STREET ADDRESS	5		ı	REET ADDRESS			
CITY-ST-ZIP		☐ DELETE		Y-ST-ZIP		Change	Addition
TITLE			5.1 TI 5.2 N	1	L	0,0.00	
NAME			5.2 10	****			
			620	BEET ADDDESS			
STREET ADDRESS	5			REET ADDRESS			

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

DELETE

SIGNATURE:

TITLE

STREET ADORESS

CITY-ST-ZIP

804/990-9140

Addition

☐ Change

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90044 035 \*\*\*150.00