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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600038845 (9)

THE TOWNSEND PUBLISHING CO., INC.

Principal Place of Business

Mailing Address

-629-09UTHEAST OTH AVENUE TOMPANO-BEACH FL-33000

620 SOUTHEAST 9TH AVENUE POMPANO BEACH FL 33060-8159

FILED Apr 28 1997 8:00am Secretary of State



1 Omi rato oo	101112 4600	TOMITHO DETOTT E BOOK	J 0.00				
					3. Date Incorporated or Qualified 05/06/1996	3a. Date of Last	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number 65-067/85		Applied For
21 200 EAST GRANADA BUDZE					63-061103		Not Applicable
Sulte, 44, 4, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional Required
22 30 27 27				•			
23 ORMOND BEACH, FL 28					6. Election Campaign Financing		0 May Be
Zip Cougtry Zip			Count				
23 32176 25 VOLUSIA 29		F1 ' F	30		8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes ▼ Yes No		
24 5	9. Name and Address of Current		30 ₁		10. Name and Address of New Reg		
FLIN	IK, LAWRENCE F		8	1 Name	<u>/_</u>		
620 S.E. 9TH AVENUE				77/19			
POMPANO BEACH FL 33060			8	82 Street Address (P.O. Box Number is Not Acceptable)			
1 Ohii 1840 DE tott C coope			8	63			
			-				
			B	4 City		FL 85 Zip	o Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abo	ve-named co	rporation submits this statement for the pration's board of directors. I hereby accept	urpose of changing	its registered
agent. I a	im familiar with, and accept the obligat	ions of, Section 607.0505, Flor	rida Statut	es.	ation's board of directors. Thereby accep	л тте арролитет а	is registered
SIGNATURE							
12.	Signature typed or printed name of registered agent OFFICERS AND		: Registered A	gent signature req	juired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DIDECTO	NDC IN 10
TITLE	PD	DELETE	1.1 TOLE		ADDITIONS/CHANGES TO OFFIC	Change	
NAME	FUNK, LAWRENCE F	E Ditter	1.2 NAM	i		C Change	
STREET ADDRESS	AAA AAAMAMAAA ATTI ATTI ATTI ATTI ATTI A			ET ADDRESS			l
CITY-ST-ZIP		OMPANO BEACH FL 33060		- \$1 - 7IP			[1
TITLE	VD	DELETE	2.1 HILE			Change	Addition
NAME	FUNK, STEPHEN T	2.21		1			
STREET ADDRESS	AAA AAAMMAAA ATII II MIII II		2.3 STREET ADDRESS				
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TITLE	SD	DELETE				Change	Addition
NAME	FUNK, JANE A		3 2 NAM	E			Ì
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CITY-ST-ZIP	POMPANO BEACH FL 33060		3.4. CHY	- 1			
TITLE	TD	DELETE	4.1 TITLE			☐ Change	Addition
NAME	MITCHELL, JENNIFER R		4 2 NAM	ıt		•	
STREET ADDRESS	620 SOUTHEAST 9TH AVENUE		4 3 STRE	ET ADDRESS			1
CITY-ST-ZIP	POMPANO BEACH FL 33060		4.4 C/TY	-SI-7IP			
TITLE		DELFTE	5 1 7/116			☐ Change	Addition
NAME			5.2 NAM	:			
STREET ADDRESS			5.3 STRE	F1 ADDRESS			
CITY-ST-ZIP			5.4 CITY	· \$1 - ZIP			
TITLE		☐ DELE1E	6.1 10116			Change	Addition
NAME	4 - 1.		6.2 NAM	£			
STREET ADDRESS			6.3 STHE	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY	-SI-ZIP			1
	by cortifu that the information eupplied	with this films does not qualify			od in Coolian 110 07/2\(\text{i}) Elorida Statutor	Lituribor poditu the	at the

4. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is supplemental annual report is much 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 trusted 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 or an attendment with an address.

ICHATUDE Yewwar frenk preside

2-24-97

1-77-4580