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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000038845**1. Corporation Name

THE TOWNSEND PUBLISHING CO., INC.

Principal Place	e of Business	Mailing Address		I (BAISED) SIN INITE OUT DOING NO		13111 01401	<b>4</b> 111 18 <b>3</b> 1
200 EAST GRANADA BLVD >620 SOUTHEAST 9TH AVENU			IF				-
STE #207 POMPANO BEACH FL 33060			<del>-</del>				
OBMOND BEACH FL 92176					TE IN THIS SPACE		
<del>US</del> -				3. Date Incorporated or Qualifed			
	_			05/06/1996			
	lace of Business	2a. Mailing Address	1 -	4. FEI Number	_	Applie	
3386	JOHN ANDERSON DR	26 3386 JOHN	ANDERSON DI	<sup>7</sup> 65-0671855		<del></del>	plicable
Suite, Apt.	#, esc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	1 7 7 7	75 Addi	
2 /		27				e Requi	<del></del>
•	e	City & State		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			'
	NO BEACH, FL	28 OR MOND BED		Trust Fund Contribution		ded to F	ees
Zip □ an √n/	Country	Zip 29 32176 3	Country Volume	8. This corporation owes the curr	rent year Intangible Yes ⊟	<b>&gt;</b>	do
432176		120 -	0 1020-111	Personal Property Tax.  10. Name and Address of New F		, per	-
<del></del>	9. Name and Address of Current I	Registered Agent	81 Name	10. Name and Address of New r	registered Agent		
EIIN	K, LAWRENCE F		1   🧦		<del></del>		
	S.E. 9TH AVENUE	dress (P.O. Box Number is Not Accepta	able) SoD DR.		}		
POMPANO BEACH FL 33060 7 83							<del></del> f
TUIV	FANO DEACHTE 33000		83				)
			84 City		85	Zip Cod	e /
			ORM	iono Beach			
office or r	to the provisions of Sections 607.0502; egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was aut	nonzed by the corpora	rporation submits this statement for the tion's board of directors. I hereby acceptions	purpose of changir pt the appointment	ig its reg as regist	ered
SIGNATURE	•						\
	Signature, typed or printed name of registered agent a		tegistered Agent signature requi		DATE	CTORS	IN 42
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRE		Addition
TITLE	PD	☐ DELETE	1.1 TITLE		Ann	cess	
NAME	FUNK, LAWRENCE F		1.2 NAME	286 JOHN ANDE	ASON TO	nly	
STREET ADDRESS	- 620 SOUTHEAST 9TH AVENUE	_	1.3 STREET ADDRESS	RUMOND BEACH, FL	27.77		
CITY-ST-ZIP	POMPANO BEACH FL 33060	·		RUNONU BEAM, FE	32//6		7.4.136
TITLE	VD	☐ DELETE	2.1 TITLE	•	DkCha 	ا مرم روم	Addition
NAME	FUNK, STEPHEN T		2.2 NAME	Jame As	,,,	024	·
STREET ADDRESS	-620-SOUTHEAST-9TH-AVENUE		2.3 STREET ADDRESS	<b>*</b> .			
CITY-ST-ZIP	POMPANO BEACH FL 33060		2.4 CITY-ST-ZIP	ABIL			<del></del> _
TITLE	SD	☐ DELETE	3.1 TITLE	<u></u>	StCha		Addition
NAME	FUNK, JANE A		3.2 NAME	SAME AS ABOUR	140	press	
STREET ADDRESS	-620-SOUTHEAST-9TH-AVENUE-	<del>-</del> 1	3.3 STREET ADDRESS	ABOUR		-	<b>/</b>
CITY-ST-ZIP	_POMPANO-BEACH-FL-33060	<del>-7</del>	3.4, CITY-ST-ZIP				
TITLE	TD	☐ DELETE	4.1 TITLE	•	<b>∑</b> rCha	-	Addition
NAME	MITCHELL, JENNIFER R		4. 2 NAME	Same as	Ao	Dress	·
STREET ADDRESS	-620-SOUTHEAST-9TH-AVENUE-	<del>&gt;</del>	4.3 STREET ADDRESS	ABOUT		any	
CITY-ST-ZIP	POMPANO BEACH FL 33060		4.4 CITY-ST-ZiP	•			
TITLE		☐ DELETE	5.1 TITLE		☐ Ch;	ange [	Addition
NAME			5.2 NAME				ĺ
STREET ADDRESS	1		5.3 STREET ADDRESS				
CITY-ST-ZIP	,		5.4 CITY-ST-ZIP				)
UITT-01-4F		☐ DELETE	6.1 TITLE		[ ] Cha		Addition

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 op an attachment with an address, with all other like empowered.

6.2 NAME

6.4 CITY-ST-ZIP

SIGNATURE:

NAMÉ STREET ADDRESS

CITY-ST-7IP

441-0220