

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

FILED

May 02 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000044487 (2)

1. Corporation Name

RICHARD ALLEN'S GRAPHICALLY SPEAKING INC.



Principal Place of Business

POST OFFICE BOX 2180  
JACKSONVILLE FL 32203

Mailing Address

POST OFFICE BOX 2180  
JACKSONVILLE FL 32203-2180

3. Date Incorporated or Qualified

05/24/1996

3a. Date of Last Report

4. FEI Number

59-3383391

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

D  
NAME: ALLEN, RICHARD G  
STREET ADDRESS: 1591 SOUTH LANE AVENUE #32Y  
CITY-ST-ZIP: JACKSONVILLE FL 32210☐ DELETED  
NAME: ALLEN, PHYLLIS L  
STREET ADDRESS: 1591 SOUTH LANE AVENUE #32Y  
CITY-ST-ZIP: JACKSONVILLE FL 32210☐ DELETED  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:☐ DELETED  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:☐ DELETED  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:☐ DELETED  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D  
1.1 TITLE  
1.2 NAME: Allen, Richard G. (Address change)  
1.3 STREET ADDRESS: 1913 N. Pearl St  
1.4 CITY-ST-ZIP: Jacksonville, FL 32206☐ Change ☐ AdditionD  
2.1 TITLE  
2.2 NAME: Allen, Phyllis L. (Address change)  
2.3 STREET ADDRESS: 1913 N. Pearl St  
2.4 CITY-ST-ZIP: Jacksonville, FL 32206☐ Change ☐ Addition3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP☐ Change ☐ Addition4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP☐ Change ☐ Addition5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP☐ Change ☐ Addition6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

Richard S. Allen RICHARD G. Allen 4-26-97 (904) 358-7824

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)