## 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

FILED

97 APR 30 PM 1: 35

PROPERTY OF STATE

	MEN I # P9600 LEE MARKETING, INC.	0062631 (2)	TALLAHASSEE, FLORIDA	
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		Mailing Address		L CANISON IN BRITE BRITE BRITE BALLE BALLE BRITE BLILD 1100 1100 1100 1101 1001
ROUTE 3 BO QUINCY FL 3		ROUTE 3 BOX 2812 QUINCY FL 32351-9785		
				3. Date Incorporated or Qualified 3a. Date of Last Report 07/26/1996
2. Principal F 21	Pace of Business	2a. Mailing Address 26		4. FEI Number Applied For Not Applied For Not Applied
Suite, Apt	#, elc	Surte, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing \$5.00 May Be
<b>23</b>	Country	28     Zip	Country	Trust Fund Contribution Added to Fees  6. This corporation has liability for intangible tax under s. 199.032
24	25 9. Name and Address of Curr		30	Florida Statutes Yes No  10. Name and Address of New Registered Agent
		ent registered Agent	81 Name	IV. Name and Address of New Hegistered Agent
	DLLAHAN, JOYCE LEE DUTE 3 BOX 2812			
	MNCY FL 32357		82 Street Add	dress (P.O. Box Number is Not Acceptable)
, 40	MIOT I E 02001		63	
*			84 City	85 Zip Code
				<b>}</b> = <b>!</b> _
office or agent. I. SIGNATURE	registered agent, or both, in the Sta am familiar with, and accept the obl		uthorized by the corporarida Statutes.  Registered Agent signature requ	poration submits this statement for the purpose of changing its register ation's board of directors. I hereby accept the appointment as registere
12.		IND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	Change Addi
NAME	HOLLAHAN, JOYCE LEE		1.2 NAME	7000021630770
STREET ADDRESS			1.3 STREET ADDRESS	7:00:00:216:30770 -05/02/9701049023
Crty - St - 7IP	QUINCY FL 32357		1,4 CITY-ST-ZIP	****165.00 ****165.00
JIII. E	VP	DELETE	2.1 TITLE	Change Addi
NAMÉ	ALLEN, JAMES		2.2 NAME	gen ( the
STREET ADDRESS	1		2.3 STREET ADDRESS	
CITY-S1-715	QUINCY FL 32357	T brigge	2 4 CITY-ST-ZIP	
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NAME STATE LABORESE	DOLLER & DOLLAR		3.2 NAME 3.3 STREET ADDRESS	
STREET ADDRESS CHTY+ST- ZIP	QUINCY FL 32357		3.4 CITY-ST-ZIP	
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STREET ADDRESS			6.3 STREET ADDRESS	HTIHE 1
C:TY - S1 - 7/P		C 1 20 N 2 CC - 1 - 12 - 13	6.4 CITY - ST - ZIP	and in Continue 110 07/2V/I). Floridd Statutes I further continue that the

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 direction 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'