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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084884 (1)

FILED Mar 25 1998 8:00am Secretary of State

PUBLISHER CONSULTANTS, INC. Principal Place of Business Mailing Address 1532 GULF BEACH DR EAST 1532 GULF BEACH DR EAST ST GEORGE ISLAND FL 32328 ST GEORGE ISLAND FL 32328 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 10/15/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3405622 21 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 8. This corporation owes or has paid the current year Integrable

Yes No Country Country Zip 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HUGHES, WHALEY 1532 GULF BEACH DR EAST 82 Street Address (P.O. Box Number is Not Acceptable) ST GEORGE ISLAND FL 32328 83 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE HUGHES, WHALEY 1.2 NAME 1532 E GULF BEACH DR STREET ADDRESS 1.3 STREET ADDRESS ST GEORGE ISLAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE ☐ Change Addition HUGHES, BETH NAME 2.2 NAME 1532 E GULF BEACH DR STREET ADDRESS 2.3 STREET ADDRESS ST GEORGE ISLAND FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE **3.1 TITLE** NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETÉ Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 DITY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE AND

Both I Nugles Belle H Hughes St

3/6/98

CR2E034 (10/97)