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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084944

1. Corporation Name

RANSOM PRINTING, INC.

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90048 008 ***150.00



Principal Place of Business		Mailing Address	Mailing Address							
3028 9TH ST N ST PETERSBURG FL 33704		3028 9TH ST N								
		ST PETERSBURG FL 33704				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or 0				
						10/10/1996				
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number Applied Fo			ied For
		26	26			59-3412077			Not /	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status De	esired		_	ditional
22		27				J. Continuate of Caster 1			e Requ	
City & State		⊢ 	City & State			6. Election Campaign Financing\$5.00 May Be Trust Fund Contribution Added to Fees				
23		28				Trust Fund Contribution			iea to	rees
Zip	Country	Zip	30	iiiu y		This corporation owes Personal Property Tax		ingible ☐ Yes	r]No
24	9. Name and Address of Curre	-	30	Τ-		10. Name and Address of				
	9. Name and Address of Curre	in Registered Agent		81	Name	TO: Traine direct				•
RANSOM, J E				82		ess (P.O. Box Number is Not Acceptable)				
	9TH ST N					ress (P.O. Box Number is Not	Acceptable)			
ST P	PETERSBURG FL 33704			83						
								1051	7in C.	
				84	City		FL	85	Zip Co	Jue
12.		ent and title if applicable. (NOTE: ND DIRECTORS	Registered	1 Agen	t signature requir	ADDITIONS/CHANGES		D DIRE	CTOF	S IN 12
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	_	Agen	t signature requir	red when reinstating)	DATE			
TITLE	PĎ	ND DIRECTORS DELETE	1.1 TI	TI F		ADDITIONS/CHANGE	3 TO OTT TOLKS AIV	Cha		Addition
NAME	RANSOM, CHAUNCEY C		1.2 N						_	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	ST PETERSBURG FL		1.4 C	ITY-S1	T-ZIP					
TITLE	OT PETERIODORIGITE	☐ DELETE	2.1 T					☐ Cha	nge	☐ Addition
NAME			2.2 N	AME						
STREET ADDRESS			2.3 S	TREET	ADDRESS					
CITY-ST-ZIP			2.40	TY-S	T- ZIP					
TITLE		☐ DELETÉ	3.1 TI	TLE				☐ Cha	nge	☐ Addition
NAME			3.2 N	AME	Į.					
STREET ADDRESS			3.3 \$	TREET	ADDRESS					•
CITY-ST-ZIP				CITY-S	T-ZIP			Cha		Addition
TITLE		☐ DELETE	4.1 T					∟ы	nge	
NAME				IAME						
STREET ADDRESS					ADORESS					
CITY-ST-ZIP		□ nei ete	4.4 C	ITY-SI	T- ZIP			☐ Cha	nae	Addition
TITLE		☐ DELETE	5.2 N							
NAME STREET ADDRESS					ADORESS					
STREET ADDRESS				ITY-S						•
CITY-ST-ZIP TITLE		☐ DELETE	6.1 T					Cha	nge	Addition
NAME			6.2 N	AME						
STREET ADDRESS					TADORESS					
SIREEI ADDRESS				ITY-S	i i					

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, with all other like empowered.

SIGNATURE: Character C. Serial Signature and typed or Prin

Chauncey C. Ransom

2/12/99

(727) 895-4405