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

**PROFIT CORPORATION** ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P96000099364 (7)

BARTIZAN AMERICAN COMMUNICATIONS, INC.

Mailing Address Principal Place of Business 602 SARASOTA QUAY **802 SARASOTA OUAY** SARASOTA FL 34236 SARASOTA FL 34236 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 65-0711678 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Country Zip 8. This corporation owes or has paid the current year Intaggible Yes Personal Property Tax due June 30. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BARRÓWS, JACK 5209 FAR OAK CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34238 83 City 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. It hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and fit off applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change Addition RHAIRMAN DELETE 1.1 TITLE TITLE BARROWS, JACK 12 NAME NAME 602 SARASOTA QUAY 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 1.4 City-ST-ZiP CITY-ST-ZIP Change T Addition DELETE 21 TITLE TITLE BELL IDENI CLAND, JAMES H 2.2 NAME NAME ALEY FINDLAY PL STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ■ Addition 31 TIFLE TITLE HARRIS, NK 3.2 NAME NAME 1720 ANCHORAGE ST. STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP SARAZOTA FL Addition TITLE DELETE 4.1 TITLE Change 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS

14. 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 changes, or on an attachment with an address. OLB

6.4 CITY-ST-ZIP

FILED

May 20 1998 8:00am

Secretary of State