

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 # P97000019535

1. Corporation Name
ZEBRA PUBLISHING COMPANY

Principal Place of Business

6821 SW ARCHER ROAD
GAINESVILLE FL 32608
US

Mailing Address

6821 SW ARCHER RD
SUITE D-1
GAINESVILLE FL 32608
US

2. Principal Place of Business

21 **1475 Casson Court**
Suite, Apt. #, etc.

2a. Mailing Address

26 **1475 Casson Court**
Suite, Apt. #, etc.

22 City & State

23 **Colorado Springs, CO**

Zip Country

24 **80919-3939** 25 **USA**

27 City & State

28 **Colorado Springs, CO**

Zip Country

29 **80919-3939** 30 **USA**

9. Name and Address of Current Registered Agent

KRENZ, BILL
2630 NW 41ST STREET
SUITE D-1
GAINESVILLE FL 32606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1997

4. FEI Number

59-3504992

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75** Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00** May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Michael K. Metzler

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

2630 NW 41st Street, Bldg. A

83

Gainesville, FL 32606

84 City

Gainesville

FL

85 Zip Code
32606

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

Michael K. Metzler

4/6/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☐ DELETE

NAME **KRENZ, BILL**
STREET ADDRESS **6821 SW ARCHER RD**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE VTD ☐ DELETE

NAME **KRENZ, SHERRY**
STREET ADDRESS **6821 SW ARCHER RD**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PSD ☒ Change ☐ Addition

1.2 NAME

KRENZ, BILL

1.3 STREET ADDRESS

1475 Casson Court

1.4 CITY-ST-ZIP

Colorado Springs, CO 80919-3939

2.1 TITLE

VTD ☒ Change ☐ Addition

2.2 NAME

KRENZ, SHERRY

2.3 STREET ADDRESS

1475 Casson Court

2.4 CITY-ST-ZIP

Colorado Springs, CO 80919-3939

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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, with all other like empowered.

SIGNATURE:

Sherry Krenz **Sherry Krenz**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/99

Date

(719) 266-6336

Daytime Phone #

CR2EN34 (1/198)