

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

FILED

**Feb 02 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000028670 (2)
1. Corporation Name
ST. GEORGE PUBLISHING AND PRINTING, INC.



Principal Place of Business 3521 KINGS RD S ST AUGUSTINE FL 32086	Mailing Address 3521 KINGS RD S ST AUGUSTINE FL 32086
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3575 US 1 South Suite, Apt. #, etc.		2a. Mailing Address 26 3575 US 1 South Suite, Apt. #, etc.		3. Date Incorporated or Qualified 03/27/1997	
22 City & State 23 ST. AUGUSTINE, FL		27 City & State 28 ST. AUGUSTINE, FL		4. FEI Number 59-3433184 Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
24 32086 25 Country		29 32086 30 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent ZITSMAN, CHARLES B 3521 KINGS RD S ST AUGUSTINE FL 32086				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PRESIDENT	<input type="checkbox"/> DELETE	1.1 TITLE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME CHARLES BITSMAN	
STREET ADDRESS		1.3 STREET ADDRESS 3521 KINGS RD. S.	
CITY-ST-ZIP		1.4 CITY-ST-ZIP ST. AUGUSTINE FL 32086	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE VICE PRES	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME RICHARD L. DAUPHANIS	
STREET ADDRESS		2.3 STREET ADDRESS 225 KINGSTON DR.	
CITY-ST-ZIP		2.4 CITY-ST-ZIP ST. AUGUSTINE FL 32095	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE _____

CR2E034 (10/97)