

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 03 1998 8:00am
Secretary of State

DOCUMENT # **P97000035449 (2)**

1. Corporation Name

ARROWTRADE PUBLISHING COMPANY



Principal Place of Business

**2630 NW 41 STREET STE D1
GAINESVILLE FL 32606**

Mailing Address

**2630 NW 41 STREET STE D1
GAINESVILLE FL 32606**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1997

4. FEI Number

31-1527583

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 or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 2295 E Newman Rd

Suite, Apt. #, etc.

2a. Mailing Address

26 2295 E Newman Rd

Suite, Apt. #, etc.

22

City & State

23 Lake City MI

Zip

24 49651

Country

25 Missaukee

City & State

28 Lake City MI

Zip

29 49651

Country

30 Missaukee

9. Name and Address of Current Registered Agent

DEHN, TIMOTHY

**2630 NW 41 STREET STE D1
GAINESVILLE FL 32606**

10. Name and Address of New Registered Agent

81 Name

Patrice Boyes, Esq., PC

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

Boyes & Associates, P.A.

83

602 South Main St

84 City

Gainesville

FL

85 Zip Code

32602

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

Patrice Boyes

Patrice Boyes

7/14/98

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 **PTD** ☐ DELETE

NAME **DEHN, TIMOTHY**
STREET ADDRESS **2285 E NEWMAN ROAD**
CITY-ST-ZIP **LAKE CITY FL 49651**

TITLE **VD** ☒ DELETE

NAME **KRENZ, SHERRY**
STREET ADDRESS **125 SW 1134 TERRACE**
CITY-ST-ZIP **NEWBERRY FL 32669**

TITLE **D** ☒ DELETE

NAME **KRENZ, BILL**
STREET ADDRESS **2630 NW 41 STREET STE D1**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **D** ☐ DELETE

NAME **DEHN, VICKIE**
STREET ADDRESS **2630 NW 41 STREET STE D1**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **D** ☒ DELETE

NAME **EDGEOMON, KAY**
STREET ADDRESS **2630 NW 41 STREET STE D1**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

**2285 E Newman Rd.
Lake City, MI 49651**

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.

SIGNATURE:

DEHN, TIMOTHY **7/14/98** **2285 E NEWMAN RD**

CR2E034 (5/98)