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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000042181 (2)

THE COLLEGIATE SOURCE, INC.

Principal Place of Business Mailing Address

FILED

May 13 1998 8:00am

Secretary of State

13525 103RD LARGO FL 33		13525 103RD AVE. NORTH LARGO FL 33774		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified 05/08/1997		<u> </u>	
	ace of Business	2a. Marling Address		4. FEI Number	A	pplied For]
21 5051	Govern Track Dr	26 505 Cyp	rass TRACED	x 59-3445163		ot Applicable	
22		Suite, Apt. #, etc.		5, Certificate of Status Desired	T	Additional equired	
City & State 23 TAMPA FL		City & State 28 TAMOR FI		6. Election Campaign Financing Trust Fund Contribution	Trust Fund Contribution Added to Fees		
Zip 24 3342		29 33624	Country 30 U.S.	This corporation owes or has paid the Personal Property Tax due June 30.	Yes 2	tangible No	
	g. Name and Address of Current	Registered Agent	041 41	10. Name and Address of New Register	ed Agent		┨
	RT, CARL B		81 Name	JOHN L. DAVIS			
13525 103RD AVE. NORTH			82 Street Address (P.O. Box Number is Not Acceptable)				1
, LAI	RGO FL 33774		B3 2	051 Cypues TRACE Dr			┨
*]
			84 City	funce F	85 Zip	Code 33624	
11. Pursuant i	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	on the above perced on	reaction submits this statement for the surpes	a of changing i	to registered	1
office or n	egistered agent, or both, in the State on m lamiliar with, and accept the obligation	of Florida, Such change was a idus of Society 607,0505. Eld	authorized by the corpor oride Statutes	ation's board of directors. Thereby accept the s	appointment as	; registered	
SIGNATURE	Agh			4)24	198		l
OIGITATOTIC	Signature, typed exposited name of a gentered argen		E: Registered Agent signature rec		E		16
12.	OF LICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A			Įĝ
TITLE NAME	D Wirt. Carl B	DECETE	1.1 TITLE 1.2 NAME		Change	Addition	15
STREET ADDRESS	13525 103RD AVE. NORTH		1.2 NAME 1.3 STREET ADDRESS				18
CITY-ST-ZIP	LARGO FL 33774		1.4 CITY-ST-ZIP				Š
TITLE	D	☐ DELETE	2.1 TITLE		Change	Addition	칺
NAME	DAVIS, JOHN L		22 NAME		·		Ĺ
STREET ADDRESS	13525 103RD AVE. NORTH		23 STREET ADDRESS				
CITY-ST-ZIP	LARGO FL 33774		2 4 City-St-ZiP	<u>-</u>			
TITLE	D	DELETE	3.1 TITLE		Change	Addition]
NAME -	OLIVER, DONALD L	/	3.2 NAME				
STREET ADDRESS	13525 103RD AVE. NORTH		3.3 STREET ADDRESS			÷	
CITY-ST-ZIP	LARGO FL 33774	D DELETE	3.4. CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·	-
TITLE		☐ DELETE	4.1 TITLE	egy ()	∐ Change	dition	
NAME PROFES ADDRESS			4. 2 NAME	3 . 4		·	
STREET ADDRESS CITY-ST-ZIP	, .		4.3 STREET ADDRESS 4.4 City - St - Zip	- 4 - 4 - L Z. t			
TITLE		DELETE	5.1 TITLE		Change	Addition	1
NAME		******* - · · · · ·	5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				1
CITY-ST-ZIP			5.4 CITY-ST-ZIP	3000025246	303		١,
TITLE		☐ D€LETE	6.1 TITLE	3000025246 -05/15/9801006	038] Change	☐ Addition	1,
NAME			6.2 NAME	***150.00		, l	N
STREET ADDRESS			6.3 STREET ADDRESS			1/2	4
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 a phitachment with an address.

CICNATUDE.

1/24/98