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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000050855 (0)

BULLSEYE COMMUNICATIONS, INC.

Principal	Place	οf	Rusiness
i ililoipai	1000	٠,	Duali (Caa

FILED May 08 1998 8:00am Secretary of State



Principal Place	e of Business	Malling Address		
7008 S. TAMIA SARASOTA FI		7006 S. TAMIAMI TRL. SARASOTA FL 34231		
OMMOUTH FE	. 34231	SANASOTA FL 34231		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				06/09/1997
2. Principal Pl	ace of Business	2a. Mailing Address		4, FEI Number Applied For
21		26 P.O. BOX 3	723	GS-0762252 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	SR 75 Additional
22		27		5. Certificate of Status Desired Fee Regulred
City & State)	City & State		6. Election Campaign Financing \$5.00 May Be
23		28 SAPASONA	FLORICA	Trust Fund Contribution Added to Fees
Zip	Country	Zip		
24	25	29 34230-3723	Country USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
29	9. Name and Address of Curren		0 010 1	10. Name and Address of New Registered Agent
B41			81 Name	
	RNELL, ROBERT W			
	3 MAIN ST., STE. 406		82 Stree	Address (P.O. Box Number is Not Acceptable)
SAF	RAŞO TA FL 34237		83	
			63	
			84 City	85 Zip Code
				FL 6 2 Code
11. Pursuant t	o the provisions of Sections 607.0502	2 and 607.1508, Florida Sta tutes	, the above-name	d corporation submits this statement for the purpose of changing its registered
agent. I ar	m lamiliar with, and accept the oblige	itions of, Section 607.0505, Florid	da Statutes.	rporation's board of directors. I hereby accept the appointment as registered
SIGNATURE				
	Signature, typed or printed name of registered ager		Registered Agent signatu	re required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ð	DELETE	1.1 TITLE	Change (MAddition)
NAME	BA CHMAN, KENNETH H		1.2 NAME	LARRY WILSON
STREET ADDRESS	7006 S. TAMIAMI TRL.		1.3 STREET ADORESS	TOOKS. TAMININI TRU
CITY-ST-ZIP	SARASOTA FL 34231		1.4 CITY - ST - ZIP	SAASO14 PL 3123
TITLE	0	DELETE	2.1 TITLE	Change Addition
NAME	ARMSTRONG, WAVER E		2.2 NAME	LEISTH CHOINNO
STREET ADDRESS	7006 S. TAMIAMI TRL.		2.3 STREET ADDRESS	TERRILY CROWNO TRY
CITY-ST-ZIP	SARASOTA FL 34231		2. 4 CITY - ST - ZIP	SARASOM 1 F1 3423
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
TITLE			5.2 NAME	L. Orango L. Addition
NAME				
STREET ADDRESS			5.3 STREET ADDRESS	
CFTY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	
TITLE		L DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-S1-ZIP	
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I mereby ceruity mai trie 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 informatic 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. بدائم أبو