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 # P97000070192

AROUND THE HOUSE PUBLISHING, INC.

Principal Place of Business Mailing Address))12 (9)(0 // 01 (22(
3568 WALDEN LANE 3568 WALDEN WEST PALM BEACH FL 33406 WEST PALM B			N LANE BEACH FL 33406			-	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
								08/12/1997			
2. Principal Place of Business 2a. Mailing Address								FEI Number		Applied For	
26								65-0773980		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							5	Certificate of Status Desired		Additional	
22 27										Required	
City & State	City & State	· & State					Election Campaign Financing Trust Fund Contribution		May Be		
Zip				Country			This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax.			□No		
	9. Name and Address of Current						10.	Name and Address of New Registered	Agent		
				81	Name						
YEEND, JOHN M					Street A	Address	(P.	O. Box Number is Not Acceptable)			
1109 S CONGRESS AVE WEST PALM BEACH FL 33406				83							
1120	TALM BEACHTE SCHOOL			03	}						
				84	City			FL	85 Zi	p Code	
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change wa	as authorized	a bv	the corbo	corpora oration's	tion bo	n submits this statement for the purpose of bard of directors. I hereby accept the appoin	changing ntment as	its registered registered	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable (N	OTE: Registered	1 Ager	nt signature re	equired wh					
12.	OFFICERS AN		13.		Т			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT ☐ Chang		
TITLE	PTD	☐ DELETE							Chang	e L'Addition	
NAME	STRINGER, ERIC W		1.2 N								
	STREET ADDRESS 3568 WALDEN LANE CRY-ST-ZIP WEST PALM BEACH FL 33406			1.3 STREET ADDRESS							
CITY-ST-ZIP TITLE	VSD	☐ DELETE		1.4 CITY-ST-ZIP					Chang	ge Addition	
NAME.	RUSSELL, KERRIE S		2.2 N								
STREET ADDRESS	3568 WALDEN LANE		2.3 S	TREE	TADDRESS						
CITY-ST-ZIP	WEST PALM BEACH FL 33406	_	2.40	ZITY-S	ST-ZIP						
TITLE	☐ DELETE 3.1 T		ITLE					Chang	ge Addition		
NAME			3.2 N	AME	ĺ						
STREET ADDRESS					TADDRESS						
CITY-ST-ZIP	·	☐ DELETE			T-ZIP				☐ Chang	e Addition	
TITLE			1	WAME.						,	
NAME					raddress					ļ	
STREET ADDRESS				TY-S	!						
CITY-ST-ZIP TITLE		DELETE			1 211	 -			☐ Chang	ge Addition	
NAME			5.2 N	AME							
STREET ADDRESS			5.3 S	TREE	T ADDRESS						
CITY-ST-ZIP				ny-s	T-ZIP						
TITLE		☐ DELETE							Chang	ge	
NAME			6.2 N	IAME							

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

May 06, 1999 8:00 am Secretary of State

05-06-1999 90213 003 ***150.00

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