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 # **P97000086184 (3)**

MCCALL PRINTING OF FLORIDA, INC.

Principal Place of Business Mailing Address

1701 AIRPORT TERMINAL DRIVE 1701 AIRPORT TERMINAL DRIVE

FILED Apr 16 1998 8:00am Secretary of State



1701 AIRPORT TERMINAL DRIVE DELAND FL 32724		1701 AIRPORT TERMINAL DRIVE DELAND FL 32724		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	S SPACE
				10/03/1997	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3470685	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z _{ip}	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29	30	Personal Property Tax due June 30.	III No □ No
	9, Name and Address of Curr	rent Hegistered Agent	B1 Name	10. Name and Address of New Registered	a Agent
FORD, F A JR			Name		
145 E RICH AVE			B2 Street A	Address (P.O. Box Number is Not Acceptable)	
DELAND FL 32724			63		
			63		
			84 City		85 Zip Code
				F	
11. Pursuant t	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	l502 and 607.1508, Florida Statu ate of Florida. Such change was	ites, the above-named authorized by the corp	corporation submits this statement for the purpose poration's board of directors. I hereby accept the at	of changing its registered [
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statutes.	oration's board of directors. I hereby accept the ap-	
SIGNATURE					
	Stunature, typed or printed name of registered	-	TE Registered Agent signature		ID D/0507050 IV 40
12.	OFFICERS 7	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AT	Change Addition
TITLE	AACCALL MIDON	E DETEIE	1.1 TITLE		Change C Aboution
NAME	MCCALL, VIRGIL	NAME:	1.2 NAME		
STREET ADDRESS	1701 AIRPORT TERMINAL	PHANE	1.3 STREET ADDRESS		
CITY-S1-ZIP	DELAND FL 32724	DELETE	1.4 CITY - ST - ZIP		Change Addition
TIPLE		CT DETEIL	2.1 TITLE		Cuange Nodition
NAME			2.2 NAME		ļ
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP		Change Addition
THE			3.1 TITLE 3.2 NAME		Therefore The Annual Control
NAME OVEREST ADDRESS					
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		LJ DILLII	4.1 TILE 4. 2 NAME		change nounter
			4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
_		L. J OLLLIE	5.2 NAME		
NAME ONDERT ADDRESS			- "		
STREET ADDRESS		•	5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change 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: V

VIRGIL 1

4-8-98

904 943-9993

3R2E034 (10/97)