## **FILED** FILE NOW: . **YG FEE AFTER MAY 1ST IS \$550.00** Apr 03 1998 8:00am 'PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham \_ ANNUAL REPOF Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P97000088045 (4) **DOCUMENT #** GRADEN COMMUNICATIONS, INC. Principal Place of Business Mailing Address 3950 3RD STREET NORTH ST. PETERSBURG FL 33703 3950 3RD STREET NORTH ST. PETERSBURG FL 33703 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/13/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Zφ Country Country 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 HAGENDORF, STANLEY John 6727 FIRST AVENUE SOUTH #108 82 Street Andress (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33707 83 3rd St. North 84 City St. Petersburg 17. 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered la. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered , Section 607.0505, Florida Statutes. Pursuant to the provisions of Se office or registered agent, of bo agent. I am familiar with, and ac Signature, typed or p (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE TITLE 1.1 TITLE Change GRADEN, JOHN NAME 1.2 NAME 3950 3RD STREET NORTH STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33703 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS

Change Addition CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE 3.1 TITLE Change 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition DELETE TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS CITY-S1-ZIP 4.4 City - ST - 2iP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 arrival 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 distance 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.

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SIGNATURE: \_\_

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Applied For

Fee Required

Added to Fees

Not Applicable

Addition