

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000004621

1. Entity Name

Beowulf Publications, Inc.

Principal Place of Business

Mailing Address

9378 Arlington Expressway, Ste. 166
Jacksonville, FL 32225

FILED

00 MAR 27 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

1628 San Marco Blvd.

1628 San Marco Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 9

Suite 9

City & State

City & State

Jacksonville, FL

Jacksonville, FL

Zip

Country

Zip

Country

32207

USA

32207

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3486850

Applied For

Not Applicable

6. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

5. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

John S. Vanderbol III
528 A Tarpon Avenue
Fernandina Beach, FL 32034 us

Name Keith Kessler

Street Address (P.O. Box Number is Not Acceptable)
1628 San Marco Blvd.

Suite 9

City Jacksonville

FL

Zip Code
32207

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE Keith Kessler

Keith Kessler President

03/24/00

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME William C Schmidt
STREET ADDRESS 64B S.E. 5th Ave.
CITY-STATE-ZIP Delray Beach, FL 33483

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME Keith Kessler
STREET ADDRESS 9378 Arlington Expressway, Ste. 166
CITY-STATE-ZIP Jacksonville, FL 32225

TITLE ☒ Change ☐ Addition
NAME Keith Kessler
STREET ADDRESS 1628 San Marco Blvd., Suite 9
CITY-STATE-ZIP Jacksonville, FL 32207

TITLE ☒ Delete
NAME Michael B Seaburn
STREET ADDRESS 7957 Copperfield Circle N.
CITY-STATE-ZIP Jacksonville, FL 32244

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☒ Delete
NAME John S. Vanderbol III
STREET ADDRESS 528 Tarpon Ave.
CITY-STATE-ZIP Fernandina Beach, FL 32034

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☒ Delete
NAME John S. Vanderbol, Jr.
STREET ADDRESS 744 Wickersham Drive
CITY-STATE-ZIP Webb City, MO 64870

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☒ Addition
NAME Mark Bocinsky
STREET ADDRESS 661 Doral Lane
CITY-STATE-ZIP Melbourne, FL 32940

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like or empowered.

SIGNATURE:

Keith Kessler

Keith Kessler, President

03/24/00

904 346-3898

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)