PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000030189

1. Corporation Name

GUARDIAN REPORTING, INC.

May 08, 1999 8:00 am Secretary of State

05-08-1999 90040 029 ***150.00



Principal Place of Business Mailing Address						1 19811991 119 (3191) 9131 49131 93131 93131 93131 93131 93131	•	
315 TAYLOR STREET PUNTA GORDA FL 33950		315 TAYLOR STREET Punta Gorda FL 33950				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 04/02/1998		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For		
21		26				105-0824816 Not Applical		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22		27				Fee Required		
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year Intangible		
24	25	29 30				Personal Property Tax. ☑ Yes ☐ No	_	
	9. Name and Address of Currer	nt Registered Agent		211		10. Name and Address of New Registered Agent		
***	DE AMOED			1 1	Name Z.	NDA A. LABOR		
AMERILAWYER				82 Street Address (P.O. Bex Number is Not Acceptable)				
	ALMERIA AVENUE			-	<u>3/8</u>	S PAYLOR STREET	_	
COH	IAL GABLES FL 33134			83		1		
		0		84	DUNT	TA GORDA FL 85 33950	2	
11. Pursuant office or ragent. I a	KINDLE WIT	GOODY				pration submits this statement for the purpose of changing its registere in's board of directors. I hereby accept the appointment as registered $4/26/99$	d	
	Synature typed or printed name of registered age	<u> </u>	gistered 13.	Agent s	gnature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	·	
12.	PD.	ND DIRECTORS DELETE	1.1 TI	TLE.		Change Add		
	LABOR, LINDA A		1.2 N/					
NAME	315 TAYLOR STREET		1.3 STREE		DRESS			
STREET ADDRESS	PUNTA GORDA FL 33950		1.4 CITY-S					
CITY-ST-ZIP TITLE	STD /	☐ DELETE	2.1 TITLE			Change Add	lition	
NAME	ROLLINS, LISA M	_	22 NAME			•		
STREET ADDRESS	315 TAYLOR STREET		2.3 STREE		DDRESS			
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TITLE		☐ DELETE	3.1 TI			☐ Change ☐ Add	ition	
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CITY-ST-ZIP				ITY-ST-Z	ZIP	Date: Date	lition	
TITLE		☐ DELETE	6.1 TF			☐ Change ☐ Add	miori	
NAME			6.2 N		222		{	
STREET ADDRESS	[6.3 S	TREET A	DDRESS		- 1	

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 of 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.

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR