

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000043246

FILED
Apr 29, 2005
Secretary of State

Entity Name: NATIONWIDE PUBLISHING COMPANY, INCORPORATED

Current Principal Place of Business:

537 DELTONA BLVD.
SUITE 100
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

537 DELTONA BLVD.
SUITE 100
DELTONA, FL 32725

New Mailing Address:

FEI Number: 59-3510350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAKON, D. SCOTT
537 DELTONA BLVD.
SUITE 100
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PLAKON, D. SCOTT
Address: 537 DELTONA BLVD
City-St-Zip: DELTONA, FL 32725

Title: VD () Delete
Name: IMBRENDA, PHILLIP J
Address: 537 DELTONA BLVD
City-St-Zip: DELTONA, FL 32725

Title: TD (X) Delete
Name: PLAKON, SUZANNE R
Address: 537 DELTONA BLVD
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. SCOTT PLAKON

PD

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date