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Apr 13, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000069735

1. Corporation Name

GULFSHORE REAL ESTATE WEEKLY, INC.



Principal Place of Business	Mailing Address
358 HARBOUR DRIVE NAPLES FL 34103	358 HARBOUR DRIVE NAPLES FL 34103

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		08/11/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3539780	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24		29		30	

9. Name and Address of Current Registered Agent

SWISHER, JOHN R
 358 HARBOUR DRIVE
 NAPLES FL 34103

10. Name and Address of New Registered Agent

81 Name	John R. Swisher
82 Street Address (P.O. Box Number is Not Acceptable)	358 HARBOUR DRIVE
83	
84 City	NAPLES
85 Zip Code	FL 34103

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE JOHN R. Swisher Pres.

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

(NOTE: Registered Agent signature required when reinstating)

4/8/99

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> DELETE	1.1 TITLE	VICE PRESIDENT, DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLES D. COLETTI	1.2 NAME	GULFSHORE COMMUNICATIONS
STREET ADDRESS	2975 S. HORSESHOE DRIVE STE 100	1.3 STREET ADDRESS	2975 HORSESHOE DRIVE STE 100
CITY-ST-ZIP	NAPLES, FL 34104	1.4 CITY-ST-ZIP	NAPLES, FL 34104
TITLE	PRESIDENT <input type="checkbox"/> DELETE	2.1 TITLE	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN R. SWISHER	2.2 NAME	JOHN A. STEINWAND
STREET ADDRESS	358 HARBOUR DRIVE	2.3 STREET ADDRESS	4099 TAMiami TRAIL NORTH
CITY-ST-ZIP	NAPLES, FL 34103	2.4 CITY-ST-ZIP	NAPLES, FL
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	JOHN R. SWISHER
STREET ADDRESS		3.3 STREET ADDRESS	358 HARBOUR DRIVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	NAPLES, FL 34103
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
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, with all other like empowered.

SIGNATURE:

JOHN R. Swisher Pres. 4/8/99 4306280
 Signature and typed or printed name of signing officer or director

CR2E034 (1/198)