

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000080979

1. Entity Name

FREE PRESS, INCORPORATED

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90032 045 ***150.00

Principal Place of Business

528 CLEMATIS STREET 2ND
WEST PALM BEACH FL 33401

Mailing Address

P.O. BOX 641
WEST PALM BEACH FL 33401-4616

2. Principal Place of Business

319 CLEMATIS STREET

3. Mailing Address

319 CLEMATIS STREET

Suite, Apt. #, etc.

SUITE 213

Suite, Apt. #, etc.

SUITE 213

City & State

WEST PALM BEACH, FL

City & State

WEST PALM BEACH, FL

4. FEI Number

65-0861533

Applied For

Not Applicable

Zip

33401

Country

USA

Zip

33401

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHEPHERD, RICHARD C
528 CLEMATIS STREET 2ND
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

MICHAEL KORETZKY

Street Address (P.O. Box Number is Not Acceptable)

319 CLEMATIS STREET

SUITE 213

City

WEST PALM BEACH

FL

Zip Code

33401

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

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

TITLE VP ☐ Delete
NAME KORETSKY, MICHAEL
STREET ADDRESS 528 CLEMATIS STREET 2ND
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☒ Delete
NAME SHEPHERD, RICHARD
STREET ADDRESS 528 CLEMATIS STREET 2ND
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE P ☐ Delete
NAME ZAMMUTO, ANTHONY J
STREET ADDRESS 1166 W NEWPORT CTR DR., #212
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE T ☒ Delete
NAME SHEPHERD, RICHARD C
STREET ADDRESS 1166 W NEW PORT CTR DR., #212
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP/D/S ☒ Change ☐ Addition
NAME MICHAEL KORETZKY
STREET ADDRESS 319 CLEMATIS ST., #213
CITY-ST-ZIP WEST PALM BEACH, FL 33401

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

TITLE P/D ☒ Change ☐ Addition
NAME ANTHONY ZAMMUTO
STREET ADDRESS 1166 W. NEWPORT CENTER DR., #212
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

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

TITLE D ☐ Change ☒ Addition
NAME LORENE ALBERT
STREET ADDRESS 319 CLEMATIS ST., #213
CITY-ST-ZIP WEST PALM BEACH, FL 33401

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

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, be empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)