## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

112 W PINE AVE

LONGWOOD FL 32750

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # S11218

1. Corporation Name

Principal Place of Business

112 W PINE AVE

LONGWOOD FL 32750

TODAY'S TRADE PUBLICATIONS, INC.

FILED
May 04, 1999 8:00 am
Secretary of State
05.04.1000.00000.000.***1.50.00



2. Principal Place of Business   2a. Mailing Address   11/07/1990   4. FEI Number   Applied for Guilder   11/07/1990   58.75 Additional   76.0321780   58.75 Additional   76.0321780   58.75 Additional   76.0321780	US	US				DO NOT WRITE IN THIS SPACE				
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Zip	_ •						-	- 1		
25   29   30   Personal Property Tax   Yes   Y		Country				<del></del>		10100		
\$ Name and Address of Currant Registered Agent  WILLOCKS, NICHOLAS 880 DEVONSHIRE BLVD LONGWOOD FL 32750  87 Sireet Address (P.O. Box Number is Not Acceptable)  88 Address (P.O. Box Number is Not Acceptable)  89 Sireet Address (P.O. Box Number is Not Acceptable)  80 City  FL 85 Zip Code  81 City  FL 85 Zip Code  82 Address (P.O. Box Number is Not Acceptable)  83 Sireet Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Zip Code  86 City  FL 85 Zip Code  86 City  FL 85 Zip Code  87 Zip Code  88 DEVONSHIRE BLVD  88 Zip Code  88 DEVONSHIRE BLVD  10 DELETE  11 TITE  12 OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17 Addition  18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11 TITE  12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12		· · · · · · · · · · · · · · · · · · ·	— · ~	_	iu y					
WILLOCKS, NICHOLAS 680 DEVONSHIRE BLVD LONGWOOD FL 32750  82 Street Address (P.O. Box Number is Not Acceptable)  83	24			יי		Torsonar Hoporty Tax.				
WILLOCKS, NICHOLAS 880 DEVONSHIRE BLVD LONGWOOD FL 32750  84		9. Name and Address of Current	Registered Agent	<del></del>	91 Name	10. Name and Address of New Registerou Ag	je,ii			
680 DEVONSHIRE BLVD LONGWOOD FL 32750  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-memod 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 submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  OFFICERS AND DIRECTORS  12. NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY-ST-2P  TITLE  OBLETE  13. TITLE  OBLETE  14. TITLE  OBLETE  15. T	\W/II I	UCKS MICHULAS		81 Name						
LONGWOOD FL 32750  83  84 City FL 85 Zip Code  11. Pursuant to the provisions 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 in familiar with, and accept the obligations of, described Statutes.  SIGNATURE  Signature, input or provide name of registered agent and size it applicable.  POFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. In				82 Street Address (P.O. Box Number is Not Acceptable)						
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Signature, hyper or printed name of ingipitative. (NOTE Resistend Agent signature required when reinstalling))   DATE		,								
TITLE	SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered					uired when reinstating) DATE				
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR