

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Suzanne B. Matheson  
Secretary of State  
Division of CORPORATE AFFAIRS

APPROVED  
AND  
FILED

95 MAY -1 AM 10:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **S43932** (0)

**SOUTHERN SUN MEDIA, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **13555 MCGREGOR BLVD. SUITE 1 FT MYERS FL 33919**  
Mailing Address: **P.O. BOX 60303 FT MYERS FL 33906**

3. Date Incorporated or Qualified: **04/09/1991** 3a. Date of Last Report: **04/04/1994**  
4. FEI Number: **69-0256715** Applied For:  Not Applicable:   
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 State, Apt. # etc.: 22 City & State: 23 Zip: 24 County: 25  
2a. Mailing Address: 26 State, Apt. # etc.: 27 City & State: 28 Zip: 29 County: 30

9. Name and Address of Current Registered Agent  
**THAYER, SHYLA D.  
8340 CHARTER CLUB CIRCLE  
SUITE 1  
FT MYERS FL 33908**

10. Name and Address of New Registered Agent  
B1 Name: B2 Street Address (P.O. Box Number is Not Acceptable): B3 B4 City: **FL** B5 Zip Code:

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 TITLE: <b>DPVS</b>	12.2 NAME: <b>THAYER, SHYLA D.</b>	13.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 STREET ADDRESS: <b>13555 MCGREGOR BLVD., #1</b>	12.4 CITY, ST, ZIP: <b>FT MYERS FL</b>	13.2 NAME:	
12.5 TITLE: <b>T</b>	12.6 NAME: <b>THAYER, SHYLA D.</b>	13.3 STREET ADDRESS:	
12.7 STREET ADDRESS: <b>13555 MCGREGOR BLVD., #1</b>	12.8 CITY, ST, ZIP: <b>FT MYERS FL</b>	13.4 CITY, ST, ZIP:	
12.9 TITLE:	12.10 NAME:	13.5 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.11 STREET ADDRESS:	12.12 CITY, ST, ZIP:	13.6 NAME:	
12.13 TITLE:	12.14 NAME:	13.7 STREET ADDRESS:	
12.15 STREET ADDRESS:	12.16 CITY, ST, ZIP:	13.8 CITY, ST, ZIP:	
12.17 TITLE:	12.18 NAME:	13.9 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.19 STREET ADDRESS:	12.20 CITY, ST, ZIP:	13.10 NAME:	
12.21 TITLE:	12.22 NAME:	13.11 STREET ADDRESS:	
12.23 STREET ADDRESS:	12.24 CITY, ST, ZIP:	13.12 CITY, ST, ZIP:	

14. I do hereby certify that the information supplied with this filing is substantially true and correct and that I am not aware of any information which would cause this filing to be false or misleading. I understand that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the owner or holder in possession of the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of changes, or as an attachment with an address.

SIGNATURE: *Shyla D. Thayer Pres.* 4-13-95 813-481-0266  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OR DIRECTOR: **Shyla D. Thayer Pres.**