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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # S51340

(5)

PRESSWERKS, INC.

FILED
Apr 29 1997 8:00am
Secretary of State

Principal Place	e of Business	Mailing Address			-   Cardinole Iou dividu alabe takki didia addi	HIBN DIGN B	ien didikalik	UIII IUH	
219 BRIARCLIFF DR 161844 ALTAMONTE SP FL LONGWOOD FL 32779		219 BRIARCLIFF DR 161844 ALTAMONTE SP FL LONGWOOD FL 32779-4410				.,			
						3. Date Incorporated or Qualified 05/10/1991		te of Last R )1/1996	eport
	lace of Business	2a. Marling Address				4. FEI Number		- <del></del>	oplied For
21		26				00 00000			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 A	
City & State		City & State				C Floriba Comming Financia			<del></del>
23		28				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added 1	
Zip Country		Zip Country				8. This corporation has liability for			
24	25	29	30			Florida Statutes			
	9. Name and Address of Current I			81 1		10. Name and Address of New Re	gistered A	lgent	
WEBB, WILLIAM PERRY, III					lame				
	BRIARCLIFF DR		8			ess (P.O. Box Number is Not Acceptab	ole)		
LON	GWOOD FL 32779								
				83					
			Ì	84 (	City			<b>85</b> Zip (	Code
44 D	to the manifeless of Continue COT 0000	d CO7 14 09 Clasida Clal	alos the ob			cation a harte this statement for the	FL		- resintate d
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 Statu 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.									
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agent	and allest groupe able (No	HF: Benedore t	Anent s	ranature require	d when re-instaling)	DATE		
12.	OFFICERS AND	and the second section of the second section is the second section of the second section is a second section of the second section of the second section is a second section of the sect	13.			ADDITIONS/CHANGES TO OFFICE		DIRECTOR	IS IN 12
TITLE	P	☐ DELETE	1. <b>1</b> TH	l E				Change	Addition
NAME	Webb, William Perry, III		1.2 NAM						
STREET ADDRESS	219 BRIARCLIFF DR	1.3 STREET		REET ADO	DRESS				
CITY-ST-ZIP	LONGWOOD FL			Y-S1-Z	IP .				
TITLE	<u> V</u>	☐ DELETE	2.1 TOLE					☐ Change	Addition
NAME	WEBB, BARBARA ELIZABETH		2.2 NA	2.2 NAME					-
STREET ADDRESS	219 BRIAR CLIFF DR			REET ADO	İ				
CITY-ST-ZIP	LONGWOOD FL	DELETE		IY - S1 - Z	YIP			☐ Change	Addition
TITLE			3 1 TIT					☐ Manys	- Modificit
NAME Street address			3.2 NA	MI REET ADI	nas ec				ļ
CITY-ST-ZIP				IY-SI-Z					
TITLE		DELETE	4.1 TII		" <del> </del>			Change	Addition
NAME			4. 2 N/						_
STREET ADDRESS				KEFT ADI	DRESS				İ
CITY-ST-ZIP			4.4 CIT	Y-S1-Z	IP				
TITLE		☐ DELETE	5 1 Til					Change	Addition
NAME			5 2 NA	ME					ļ
STREET ADDRESS			5 3 811	REFT ADO	RESS				Ì
CITY-ST-ZIP			5.4 Ci1	Y-\$1-Z	IP .				
TITLE		☐ DELETE	6 1 113	Lf				Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6381	REET ADI	JRESS				
CITY-ST-ZIP			6.4 CIT	Y-S1-Z	IP				

4. I do 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 suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustace 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 attacking the state of the corporation of the corporati

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3-18.97