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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

S78357

1. Corporation	MENT # \$783 DIRECTORIES, INC.	557	(8)	
Principal Place	of Business	Mailing Address		
3834 KILLEARN CT. TALLAHASSEE FL 32308 US		3824 KILLEA		
54		00		3. Date Incorporated or Qualified 3a. Date of Last Report 09/06/1991 08/04/1995
 Principal Pla 	ice of Business	2a. Mailing Addre	ess	4. FEI Number Applied For 59-3109552 Not Applied For
Suite, Apt. #	, etc.	Suite, Apt. #,	, etc.	5. Certificate of Status Desired S8.75 Additional
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
3	0-1-	28		Trust Fund Contribution Added to Fees
Ζφ 4]	Country 25	Zip 29	Country 30	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No
	9. Name and Address of Curre	ent Hegistered Agent	81 Nam	10. Name and Address of New Registered Agent
LAURI	ENZO, PHYLLIS J	\cap	- ! \	at Address (P.O. Box Number is Not Acceptable)
3834 I	(ILLEARN CT.	/ \		a Address (F.O. Box Number is Not Acceptable)
TALLA	HASSEE FL 32308		83	
			' Л	
11. Pursuant to	o the provisions of Sections 607.050	02 and 607. 508, Flynda	a Statutes, the above named	FL 85 Zip Code corporation submits this statement for the purpose of changing its registered offi
SIGNATURE _	Signature typed or phinted name of registered aga	ent and title if applicable	Λ	corporation submits this statement for the purpose of changing its registered offis board of directors. I hereby accept the appointment as registered agent. I am
SIGNATURE	Signature: Typed or printed name of registered age OFFICERS A	ent and title if applicable	a Statutes, the above named authorized by the corporation statutes (NOTE: Acgistered Agent signature) 13.	corporation submits this statement for the purpose of changing its registered office board of directors. I hereby accept the appointment as registered agent. I am Page 1. Date 1. Da
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