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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V16765

LEE BUSINESS DIGEST, INC.

(2)

## **FILED** Mar 11 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 9131 COLLEGE PKWY. 9131 COLLEGE PKWY. 138-146 138-146									
		138-146	138-146						
FT. MYERS FL	33919	FT. MYERS FL 33919-48	27						
US			US			3. Date Incorporated or Qualified 02/25/1992		ate of Last F <b>26/1996</b>	leport
2. Principal I	Place of Business	2a, Mailing Address				4. FEI Number		A	pplied For
21		26				65-0317042			ot Applicabl
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Siti	ile	Crty & State				6. Election Campaign Financing		\$5.00	May Be
23		28			<del></del>	Trust Fund Contribution			to Fees
_ Zip −i	Country	Zip		untry		8. This corporation has liability for in			3. 199.032,
4	25	29	30	- <del> </del>			Yes		
	9, Name and Address of Cu	rrent Registered Agent		B1	Name	10. Name and Address of New Reg	)(STELEC	Agent	
	AFMAN, ROBERT W.				Name				
	1 COLLEGE PKWY.			82	Street Add	iress (P.O. Box Number is Not Acceptab	le)		
	-146 			83					
FI.	MYERS FL 33919			03					
				84	City		FL	<b>85</b> Zip	Code
		55.50 F		ļ		poration submits this statement for the p			
12.	Sugniture (2) in an expression provided races of registern OFFICERS	diagentiand title diapplicable (I AND DIRECTORS	NOTE: Register	<u>`</u>	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AN	D DIRECTO	RS IN 12
TIT; F	P	DELETE	1.13	TITLE				Change	Additio
NAME	LOAFMAN, ROBERT W		1.21	NAME	- 1				
STHEET ADDRESS	9131 COLLEGE PKWY., 13	B-1 <b>4</b> 6	1.3 5	STREET	ADDRESS				
CITY-ST 76	FT. MYERS FL 33919		140	CITY S	T-ZIP				
THEF		DELETE	211	TITLE				Change	Additio
NAME			221	NAME					
STREET ADDRESS			23	STREET	ADDRESS				
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THLE		DETETE		TITLE		•		☐ Change	Additio
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STREET ADDRESS					ADDRESS				
CHY-ST-20 TITLE		DELETE		CITY - ! TITLE	51- LIF			☐ Change	Additio
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STREET ADDRESS					ADDRESS	·			
CITY-ST-ZIP				DITY-S	1				
THILF		DELETE		TITLE				Change	Additio
NAME				NAME					
STREET ADDRESS					ADDRESS				
C TY - ST - ZiP				CITY-S					
TITLE		DELETE		TITLE				Change	Addilio
NAME				NAME	-			-	
STREET ADDRESS					ADDRESS				
City St. 7ip				DITY-S					

14. 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 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.



99/ 48/ 1222