


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # V17498
 1. Entity Name
 LIBERTY PUBLISHING COMPANY, INC. OF FLORIDA



Principal Place of Business Mailing Address
 6347 LACOSTA DRIVE P.O. BOX 4248
 BOCA RATON, FL 33433 US DEERFIELD BEACH, FL 33442

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04132005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 52-1076623 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LITTLE, JEFFREY B.
 6347 LACOSTA DR
 J
 BOCA RATON, FL 33433

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LITTLE, JEFFREY B.
STREET ADDRESS	6347 LACOSTA DR APT J
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	D
NAME	LITTLE, JUDITH A.
STREET ADDRESS	6347 LACOSTA DR APT J
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	D
NAME	LITTLE, SUZANNE K.
STREET ADDRESS	3491 PALLADIAN CIR
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/18/05-80078-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Judith A. Little Judith A. Little 4-15-05 (561)395-3750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #