

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V34594**

(4)

1. Corporation Name

ADVERTISING SERVICES, INC.

Principal Place of Business

**5373 HWY 98 EAST
DESTIN FL 32540
US**

Mailing Address

**P. O. BOX 1659
DESTIN FL 32540
US**



2. Principal Place of Business		28. Mailing Address	
21	20011 Emerald Coast	26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23	Destin, FL	28	
Zip	Country	Zip	Country
24	32549	25	
29		30	

3. Date Incorporated or Qualified 05/05/1992	3a. Date of Last Report 04/11/1995
4. FEI Number 59-3130394	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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES STREET
SUITE 105
TALLAHASSEE FL 32301**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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 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 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and the corporation)

(Name, Title, and Agent's Signature of the registered agent, when not stated)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	EARLES, CHARLIE	1.2 NAME	
STREET ADDRESS	5373 HWY. 98, EAST	1.3 STREET ADDRESS	20011 Emerald Coast Pkwy
CITY-ST-ZIP	DESTIN FL 32541	1.4 CITY-ST-ZIP	Destin, FL 32541
TITLE	VD	2.1 TITLE	
NAME	TREESE, HARRY	2.2 NAME	
STREET ADDRESS	427 NORTH 3RD STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	WACO TX 76710	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	
NAME	EARLES, AMY L.	3.2 NAME	
STREET ADDRESS	5373 HWY 98 EAST	3.3 STREET ADDRESS	20011 Emerald Coast Pkwy
CITY-ST-ZIP	DESTIN FL	3.4 CITY-ST-ZIP	Destin, FL 32541
TITLE	D	4.1 TITLE	
NAME	CHRISTENSEN, ROBERT L	4.2 NAME	
STREET ADDRESS	5373 HWY. 98, EAST	4.3 STREET ADDRESS	20011 Emerald Coast Pkwy
CITY-ST-ZIP	DESTIN FL 32541	4.4 CITY-ST-ZIP	Destin, FL 32541
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, as changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29 / 1996 904-8378820

CR2E034 (12/95)