

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V57875** (9)

NEIGHBORS PUBLISHING INC.



Principal Place of Business

Mailing Address

C/O HOMES & LAND MAGAZINE
8200 HIDDEN LAKE DR S
JACKSONVILLE FL 32216
HIS

% DAVID A. KING. ATTORNEY
1416 KINGSLEY AVE
ORANGE PARK FL 32073

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite Apt. #, etc.

22 City & State

27 _____
City & State

Zip	Country
24	25

29	Zip	30	Country
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9. Name and Address of Current Registered Agent

KING, DAVID A
ATTORNEY AT LAW
1416 KINGSLEY AVENUE
ORANGE PARK FL 32073

81 | Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

E	85	Zip Code
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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

^a Substrate, type of product and name of type of test used are listed in parentheses.

(P)11c: *Bejstare d'Agre d'Sip d'ne t'eg-jet, l'et d'ne t'eg-jet d'ne;*

[157]

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DEFER
NAME	NEIGHBORS, JOHN A	
STREET ADDRESS	8200 HIDDEN LAKE DR S	
CITY-ST-ZIP	JACKSONVILLE FL	

TITLE	D	☐ DELETE
NAME	NEIGHBORS, MARSHA	
STREET ADDRESS	8200 HIDDEN LAKE DR S	
CITY ST ZIP	JACKSONVILLE FL	

NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DEFER
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TITLE	[] DELETE
NAME	
SOME: I ADDRESS	
CITY STATE ZIP	

TITLE	DATE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	[] DEFERRED
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	DATE	POSITION	STATUS
BB			☒ Change ☐ Addition

1. TITLE	DP	☒ Change	☐ Addition
2. NAME			
3. STREET ADDRESS			
4. CITY, ST, ZIP			

2.1 TITLE ☐ Change ☐ Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-STATE-ZIP

3.1 TIME	☐ Change	☐ Add Item
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, STATE, ZIP		

4.1 Title ☐ Change ☐ Addition
 4.2 Name
 4.3 STREET ADDRESS
 4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Add on
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY, STATE, ZIP

6.1 TITLE	☐ Change	☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY/STATE/ZIP		

14. I do hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address.

SIGNATURE: *X John A. Dignow, President*

4/3/90

904-768-3300

CR2E034 (12/95)