

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 012575

FILED  
Apr 02, 2007  
Secretary of State

Entity Name: COLLIER COUNTY PUBLISHING COMPANY

## Current Principal Place of Business:

312 WALNUT ST, 28TH FL  
P.O. BOX 5380  
CINCINNATI, OH 45201 US

## New Principal Place of Business:

312 WALNUT ST, 28TH FL  
CINCINNATI, OH 45202 US

## Current Mailing Address:

312 WALNUT ST, 28TH FLOOR  
P.O. BOX 5380  
CINCINNATI, OH 45201 US

## New Mailing Address:

FEI Number: 59-0578327      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FISH, JOHN J  
Address: 1075 CENTRAL AVE  
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete  
Name: LOWE, KENNETH W  
Address: 2940 GRANDIN ROAD  
City-St-Zip: CINCINNATI, OH 45208

Title: S ( ) Delete  
Name: KUPRIONIS, M D  
Address: 214 REDBUD CT  
City-St-Zip: LOVELAND, OH 45140

Title: T ( ) Delete  
Name: WOLFZORN, E J  
Address: 2255 HEATHER HILL BLVD.  
City-St-Zip: CINCINNATI, OH 45208

Title: DV ( ) Delete  
Name: NECASTRO, JOSEPH G  
Address: 312 WALNUT STREET  
City-St-Zip: CINCINNATI, OH 45202

Title: AT ( ) Delete  
Name: CARROLL, MICHAEL W  
Address: 8385 GREENLEAF DR.  
City-St-Zip: CINCINNATI, OH 45255

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL W. CARROLL

AT

04/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date