

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 656244

**Entity Name:** GLEIM PUBLICATIONS, INC.

**Current Principal Place of Business:**

4201 NW 95 BLVD.  
GAINESVILLE, FL 32606

**Current Mailing Address:**

PO BOX 12848  
UNIVERSITY STATION  
GAINESVILLE, FL 32604 US

**FEI Number:** 59-1976030

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

IRVIN N. GLEIM  
4201 NW 95 BLVD.  
GAINESVILLE, FL 32606 US

*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

**Officer/Director Detail :**

Title DPS  
Name GLEIM, IRVIN N  
Address 1408 N W 47TH TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title V  
Name GLEIM, LAWRENCE A  
Address 4607 NW 44 PLACE  
City-State-Zip: GAINESVILLE FL 32606

Title V  
Name GLEIM, DARLENE  
Address 1408 N W 47TH TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title V  
Name GLEIM, GARRETT W  
Address 1408 NW 47 TERRACE  
City-State-Zip: GAINESVILLE FL 32605

*I hereby 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 all other like empowered.*

**SIGNATURE:** IRVIN N. GLEIM

**PRESIDENT**

**03/13/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date