

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V13486

Entity Name: FLORIDA COMMUNITY PAPERS ADVERTISING NETWORK, INC.**Current Principal Place of Business:**13405 SE HWY. 484
BELLEVIEW, FL 34420**Current Mailing Address:**P.O. BOX 1149
SUMMERFIELD, FL 34492-1149 US**FEI Number: 59-3110612****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NEUHARTH, DAVID JMR
12601 SE 53RD TERRACE ROAD
BELLEVIEW, FL 34420 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 DIRECTOR
Name KENDALL, JIM
Address 201 KELSEY LANE
City-State-Zip: TAMPA FL 33619

Title PRESIDENT
Name REY, JUSTO
Address 5600 SW 135 AVENUE
SUITE 216
City-State-Zip: MIAMI FL 33183

Title SECRETARY
Name NEUHARTH, DAVID J
Address 12601 SE 53 TERRACE ROAD
City-State-Zip: BELLEVIEW FL 34420

Title DIRECTOR
Name BLONDE, SCOTT
Address 2510 DEL PRADO BLVD.
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name DELATORRE, CHARLES
Address 4400 NW 36 AVE.
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name AUTREY, DAN
Address 9911 SEMINOLE BLVD.
City-State-Zip: SEMINOLE FL 33772

Title VP, TREASURER
Name MURRAY, WENDY
Address 3440 MARINATOWN LANE
STE. 203
City-State-Zip: NORTH FT. MYERS FL 33903

Title DIRECTOR
Name GRIFFIN, SUSAN
Address 1102 A1A NORTH
UNIT 108
City-State-Zip: PONTE VEDRA BEACH FL 33082

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: DAVID J. NEUHARTH**SECRETARY****01/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date