FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 275674

(0)

TOMLINSON'S SPACE REALTY, INC.

FILED
Apr 30 1997 8:00am
Secretary of State



							Elika siri katil shil			
Principal Pia	ce of Business	Mailing Address				4 164116 (1911 1440)	filid disti inati atar	aini aibii dil	,,,	*****
3297 DIXIE HM P.O. BOX 999-	YY. NE, PALM BAY, FL 32905	3297 DIXIE HWY. P.O. BOX 999-	3297 DIXIE HWY, NE. PALM BAY, FL 32905 P.O. BOX 989-							
MELBOURNE F			MELBOURNE FL 32902-0999							
US		US				3. Date Incorporate 11/13/1963	ed or Qualified		te of Last R 8/1996	leport
2. Prencipal	Place of Business	2a. Mailing Add	ress			4. FEI Number	·····	1 411		oplied For
21		26	26			59-1035762			, No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			5 Cortificate of Status Desired Status				
22		27								equired
City & Sta	ile	City & State				6. Election Campa				May Be
23 Zip	Country	28 Zip		Country		8. This corporation				to Fees
24	25	29	- a	10	!	Florida Statutes		Yes		. 199.032,
<u></u>	9. Name and Address of Cur			<u></u>		10. Name and Add				
TOF	ALINSON, T R			81	Name					
	7 N.E. DIXIE HWY.			82	Street Add	ress (P.O. Box Number	is Not Accepta	hle)		
	M BAY FL 32905				Siloci riagi	Odinbri ADD . O. 1) BBD1	ia isot necopia			
				B3						
				84	City				85 Zip	Code
				1				FL		
office or agent 1	I to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob	tate of Florida, Such char bligations of, Section 607	nge was au '.0505, Flori	ida Statute	y the corporal s.	norts board or directors	. Thoroby abbo	the min minter		-
SIGNATURE	Sign one of a printed name of registered	d agent and title if applicable.		Registered Age		red when reinstating)		DATE		
SIGNATURE	Suprementation of pinted name of registered OFFICERS.	d agent and title if applicable. AND DIRECTORS	(NOTE	Flegislered Age				DATE	DIRECTOR	3S IN 12
SIGNATURE 12. Time	Suppose Tiglio or printed name of registered OFFICERS	d agent and title if applicable. AND DIRECTORS		Regislered Age 13. 1.1 TiTLE		red when reinstating)		DATE		
SIGNATURE 12. THE MAY:	Supremental representation of registered OFFICERS. PD TOMUNSON, T R	d agent and title if applicable. AND DIRECTORS	(NOTE	Registered Age 13. 1.1 TITLE 1.2 NAME	ent signature requi	red when reinstating)		DATE	DIRECTOR	3S IN 12
SIGNATURE 12. THE NAVE SIBLET ADDRESS	OFFICERS. PD TOMLINSON, T R 3297 N.E. DIXIE HWY.	d agent and title if applicable. AND DIRECTORS	(NOTE	Registered Age 13. 1.1 TiTLE 1.2 NAME 1.3 STREET	eni signalure requi	red when reinstating)		DATE	DIRECTOR	3S IN 12
SIGNATURE 12. THE NAVE	Supremental representation of registered OFFICERS. PD TOMUNSON, T R	d agent and title if applicable. AND DIRECTORS D	(NOTE	Registered Age 13. 1.1 TITLE 1.2 NAME	eni signalure requi	red when reinstating)		DATE CERS AND	DIRECTOR	3S IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-249	OFFICERS. PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	d agent and title if applicable. AND DIRECTORS D	(NOTE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5	eni signalure requi	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12
SIGNATURE 12. THE NEW! SIREFI ADDRESS CHY-S1-2P THE	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY.	d agent and title if applicable. AND DIRECTORS D	(NOTE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE	ent signature requi	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12
SIGNATURE 12. THE NAVE SIREH ADDRESS CITY-ST-2# TITTE NAME	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY	d agest and title if applicable. AND DIRECTORS D	(NOTE)	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	I ADDRESS I ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 112. THE NAVE STREEL ADDRESS CHY-ST-7#P THY NAME STREET ADDRESS	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY.	d agest and title if applicable. AND DIRECTORS D	(NOTE	Registered Age 13. 1.1 TiTLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	I ADDRESS I ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12
SIGNATURE 12. THE NAVE STREET ADDRESS LITY - \$1, 24P TITE NAME STREET ADDRESS CITY - \$1-24P	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY.	d agest and title if applicable. AND DIRECTORS D	(NOTE)	13. 1.1 TiTLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS DITY ST-ZEP TITTE NAME STREET ADDRESS CITY ST-ZEP TITTE NAME STREET ADDRESS STREET ADDRESS	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	d agest and title if applicable. AND DIRECTORS D	(NOTE)	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 City-S 2.1 Title 2.2 NAME 2.3 STREET 2.4 City- 3.1 Title 3.2 NAME 3.3 STREET	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. THE MAVE STREET ADDRESS CITY: ST-ZIP TITLE MAME STREET ADDRESS CITY: ST-ZIP STREET ADDRESS CITY: ST-ZIP STREET ADDRESS CITY: ST-ZIP STREET ADDRESS	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	d agret and title if applicable. AND DIRECTORS D D	(NOTE)	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition
SIGNATURE 12. THE NAME SIREH ADDRESS CITY-ST-2P TITTE	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	d agret and title if applicable. AND DIRECTORS D D	(NOTE)	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 City-5 2.1 Title 2.2 NAME 2.3 STREET 2.4 City- 3.1 Title 3.2 NAME 3.3 STREET 3.4 City-4 1 Title	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. THE NAME SIRELLADDRESS CITY ST- 24P TITLE NAME SIRELLADDRESS CITY ST- 24E NAME SIRELLADDRESS CITY ST- 24C TITLE NAME	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	d agret and title if applicable. AND DIRECTORS D D	(NOTE)	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition
SIGNATURE 12. THE NAVE STREEL ADDRESS CHY-ST-ZIP THE NAME STREEL ADDRESS	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	d agret and title if applicable. AND DIRECTORS D D	(NOTE)	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition
SIGNATURE 12. THE NAME SIRELLADDRESS CITY ST- 24P TITLE NAME SIRELLADDRESS CITY ST- 24E NAME SIRELLADDRESS CITY ST- 24C TITLE NAME	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	Jagret and wile if applicable. AND DIRECTORS D D	(NOTE)	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition
SIGNATURE 12. THE NAVE STREEL ADDRESS CHY-ST-78P THE NAME STREEL ADDRESS CHY-ST-78P THE NAME STREEL ADDRESS CHY-ST-78P NAME STREEL ADDRESS CHY-ST-78P STREEL ADDRESS CHY-ST-78P	PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	Jagret and wile if applicable. AND DIRECTORS D D	(NOTE) ELETE PELETE	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. THE NAVE STREEL ADDRESS CITY-ST-78P THE NAME STREEL ADDRESS CITY-ST-78P THE	OFFICERS. PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	Jagret and wile if applicable. AND DIRECTORS D D	(NOTE) ELETE PELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-4 1 TITLE 4 2 NAME 4 3 STREET 4 4 CITY-S 5.1 TITLE	I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. THE NAME SIREH ADDRESS CITY-ST-ZIP THLE NAME	OFFICERS. PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	D agret and whell applicable. AND DIRECTORS D D	(NOTE) ELETE PELETE PELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME	I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. THE NAVE STREEL ADDRESS CHY-ST-ZIP THE NAME STREEL ADDRESS CHY-ST-ZIP THE BAME STREEL ADDRESS	OFFICERS. PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	D agret and whell applicable. AND DIRECTORS D D	(NOTE) ELETE PELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 THLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET	I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change	Addition Addition Addition
SIGNATURE 12. THE NAVE STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CHY-ST-ZIP	OFFICERS. PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	D agret and whell applicable. AND DIRECTORS D D	(NOTE) ELETE PELETE PELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.5 TITLE 5.5 NAME 5.5 STREET 5.4 CITY-S	I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOF Change Change Change Change	RS IN 12 Addition Addition Addition Addition Addition
SIGNATURE 12. THE MAVE STREEL ADDRESS CHY, ST-249 THE NAME STREEL ADDRESS CHY, ST-241 THE NAME STREEL ADDRESS CHY, ST-249 THE	OFFICERS PD TOMLINSON, T R 3297 N.E. DIXIE HWY. PALM BAY, FL 00000 VST TOMLINSON, DOROTHY 3297 N.E. DIXIE HWY. PALM BAY, FL 00000	D agret and whell applicable. AND DIRECTORS D D	(NOTE) ELETE PELETE PELETE	13. 1.1 Title 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME	I ADDRESS ST-ZIP	red when reinstating)		DATE CERS AND	DIRECTOF Change Change Change Change	RS IN 12 Addition Addition Addition Addition Addition

tank an officer or director of the corporation or the receiver or trustee empowered to excurs an another established to 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 13 if changed, or on an attachment with an address.