FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # Corporation Name TUSCAWILLA DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 611 WYMORE ROAD 611 WYMORE ROAD **WINTER PARK FL 32789-2856** WINTER PARK FL 32789-2856 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1978 03/14/1995 2. Principal Place of Business 2a. Mailing Address 4. EEL Number Applied For 21 26 59-3000795 Not Applicable Suite. Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name: FIELDING JR. EDWARD N. Street Address (P.O. Box Number is Not Acceptable) 82 **611 WYMORE ROAD** WINTER PARK FL 32789 83 84 City Zip Code 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 familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE I 1 DILE Change Addition FIELDING JR, EDWARD N. 1.2 NAME STREET ADDRESS 611 WYMORE ROAD 1.3 STREET ADDRESS WINTER PARK FL CITY-ST-7/P 14 City St-2iP TITLE SD DELFTE 2 17HLE Change Addition NAME TEPPER, FRANK 2.2 NAME **611 WYMORE ROAD** STREET ADDRESS 2.3 STHEE! ADDRESS WINTER PARK FL CITY - ST - ZIF 24 CITY - S1 - 7 P TITLE DELF If 3 1 T TEE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - 51 - ZIP TITLE DELFTE 4 1 III F Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 7IP TUTLE DELETE 5 1 THLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - Z/P TITLE DELETE 6 11 THE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6 + \$1RSET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this fling is voluntarily turnished and does not quarry 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 60?, Florida Statutes, and that my name EDWARD N FIELDING JE

CR2E034 (12/95)

407-644-6200