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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation	JMENT # 7456 on Name	607 (2)				
THOM	MAS CENTER ASSOCIAT	TES, INC.		t 100 li) 100 li Right divis sivit sant)
Principal Plac	ce of Business	Mailing Address				
302 NE 6TH	1 AVE	P.O. BOX 12752				
GAINESVILL	E FL 32604-9752	GAINESVILLE FL 32604	-9752			
US		US		3. Date incorporated or Qualified	3a. Date of Last	Report
				01/17/1979	02/17/1	995
-	Place of Business	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		59-1874171		Not Applicable
2		27		Certificate of Status Desired		Additional Required
City & State		City & State		6. Election Campaign Financing		May Be
3		28		Trust Fund Contribution		d to Fees
Zip ¬	Country	Ζiρ	Country	8. This corporation has liability for i	ntangible tax ynder s.	199.032,
<u> </u>	9. Name and Address of 0	29	30		Yes De No	
	9. Name and Address of C	Jurrent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent	
	W 30TH AVE SVILLE FL 32606		83	22 NIW 68th D	rive	
			84 City	- //	6E 7.	o Codo
			84 City 6	rainesulle	FL 3	2606
Pursuant or registe	to the provisions of Sections 613	7.0502 and 617.1508, Florida Statute of Florida, Such change was authorize	es the above named cov	poration submits this statement for the purposed of dispotors. The relative account the appropriate of the purposed of dispotors.	FL 3	2606
or registe	ereo agent, or both, in the State o	7.0502 and 617.1508, Florida Statute of Florida. Such change was authorize f, Section 617.0503, Florida Statutes	es, the above named coned by the corporation's b	Painesul/ E poration submits this statement for the purposerd of directors. Thereby accept the appo	FL 3	2606
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SIGNATURE: Sharon Connell
slonature and typed or printed name of bigning officer or director

3/25/96