## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

**/0**\

1. Corporation Name  BOOHER DEVELOPMENT	CORPORATION					
Principal Place of Business	Mailing Address					
% THOMAS P. PAGE 5614 BAYSIDE DR. ORLANDO FL 32819	% THOMAS P. PAGE 5614 BAYSIDE DR. ORLANDO FL 32819					
2. Principal Place of Business	2a, Maling Address					



% THOMAS P. PAGE 5614 BAYSIDE DR. ORLANDO FL 32819		;	% THOMAS P. PAGE 5614 BAYSIDE DR. ORLANDO FL 32819				Date Incorporated or Qualified     05/15/1984	<b>3a.</b> Date <b>0</b>	of Last Fi	•	
2. Principal Plac	ce of Business	2a. 1	Valing Address				4. FEI Number			Applied For	
1		26					59-2411026			Not Applicable	
Suite, Apt. #,	, etc.	27	Suite, Apt. #. etc.				5. Certificate of Status Desired			5 Additional Required	
City & State		28	Oity & State				Election Campaign Financing     Trust Fund Contribution		Adde	May Be	
Zip	Country 25	29	Zit)	Cour 30	ntiy			. □ No		199.032,	
	9. Name and Address of Curre	nt Registe	red Agent				10. Name and Address of New F	Registered A	gent		
					81	Name					
PAGE, THOMAS P. 5614 BAYSIDE DR.					82	Street Add	ress (P.O. Box Number is Not Acceptable)				
ORLANI					83						
					84	City			85 Z	p Code	
					٠-	Oity		FL		, p 0000	
12.	OFFICERS AF	ND DIRECT	ORS DELETE	13.	1. F		ADDITIONS/CHANGES TO OFF		DIRECTO  Change		
TITLE	. –		DELFTE	1 11	1u E				] Change	☐ Addition	
NAME	BOOHER, D. BRUCE			1.2 NA		ŧ					
STREET ADDRESS	5614 BAYSIDE DR.					ADDRESS					
C:TY-ST-ZIP	ORLANDO FL		DELETE	1 4 CI		IT-ZIP			7 Change	☐ Addition	
TITLE			L.J DELK IL	22 N				L	] Guenge		
NAME STREET ADDRESS						ADDRESS					
CITY - ST - ZIP				240		1					
TITLE			DELETE	3 1 7					Change	☐ Addition	
NAME			_	3 2 N/	ME						
STREET ADDRESS				33 S	IRE č	T ADDRESS					
CITY-ST-ZIP				3.4 CI	ty.S	31-712					
TITLE			☐ DELETE	4 1 T	ΙLF				] Change	☐ Addition	
NAME				4.2 N	AME						
STREET ADDRESS						ADORESS					
CITY-ST-ZIP			FIII DOLETE			31 - 21F			7 Change	☐ Add-tion	
TITLE			DELETE	5 1 1				L	_ стапуе	Manager A	
NAME				5 2 N		Leboses					
STREET ADDRESS						F ADDRESS					
CHTY-ST-ZIP			DELETE	54C		ST - Z'P		г	1 Change	☐ Addition	
TITLE			L. Decent	62 N				L		had	
NAME OZOSET ABORECE						r annarss					

6.4 CiTY - ST ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/94

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CR2E034 (12/95)