## 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

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Suite, Apt. #, etc.

City & State

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DOCUMENT # H56285

Country

9. Name and Address of Current Registered Agent

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HOMISLO, INCORPORATION I

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T. D. INDUSTRIES, INC.		1 12018/A A/A1 APAIR ABAIR AFAIR AFAIR			
Principal Place of Business	Mailing Address				
P. O. BOX 3128 P. O. BOX 3128 JASPER AL 35502 JASPER AL 35502					
		3. Date Incorporated or Qualified 05/09/1985	3a. Date of Last Report 03/10/1995		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For		

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63-0899913		Applied For
		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
8. This corporation has liability to Florida Statutes	or intangible res <b>X</b> No	tax under s 199.032,
10. Name and Address of New	v Registered	Agent
Name	···,	··
Street Address (P.O. Box Number is Not Accep	table)	

Zip Code

222 LAKEVIEW AVE SUITE 800 83 WEST PALM BEACH FL 33401 84 City

Suite, Apt. #, etc.

City & State

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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am

Country

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Signal, re, typed or profind name of regel/rent agont and trib if aquicable  2. OFFICERS AND DIRECTORS		(16.01) Fourstered Agent is goal as organised which remotivings  13. ADDITION		DATE NS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
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ENGEL, ALAN Z		3.2 NAME		€ O-lange		
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REST ADDRESS		6 3 STREET ADORESS				
TY - S1 - ZIP		6 4 CITY-SI-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: SOUTH H. Engle

AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

205-221-4000 Daytine Phone is