

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H82145** (4)
1. Corporation Name
TOLLMAN-HUNDLEY ORLANDO, INC.

Principal Place of Business 1886 ROUTE 52 HOPWELL JUNCTION NY 12533	Mailing Address 1886 ROUTE 52 HOPWELL JUNCTION NY 12533
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/23/1985	
4. FEI Number 13-3305965	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 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 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent's signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC <input type="checkbox"/> DELETE	1.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TOLLMAN, STANLEY S.	1.2 NAME	TOLLMAN, BRETT G.
STREET ADDRESS	1886 ROUTE 52	1.3 STREET ADDRESS	1886 ROUTE 52
CITY-ST-ZIP	HOPWELL JUNCTION NY 12533	1.4 CITY-ST-ZIP	HOPWELL JUNCTION, NY 12533
TITLE	DP <input type="checkbox"/> DELETE	2.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUNDLEY, MONTY D.	2.2 NAME	KENDRICK, CRAIG
STREET ADDRESS	1886 ROUTE 52	2.3 STREET ADDRESS	1886 ROUTE 52
CITY-ST-ZIP	HOPWELL JUNCTION NY 12533	2.4 CITY-ST-ZIP	HOPWELL JUNCTION, NY 12533
TITLE	DT <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOLLMAN, ARNOLD	3.2 NAME	
STREET ADDRESS	1886 ROUTE 52	3.3 STREET ADDRESS	
CITY-ST-ZIP	HOPWELL JUNCTION NY 12533	3.4 CITY-ST-ZIP	
TITLE	VS <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREEDMAN, SANFORD	4.2 NAME	
STREET ADDRESS	1886 ROUTE 52	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOPWELL JUNCTION NY 12533	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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]

BRETT G. TOLLMAN 11/26/98 (914) 222-2602

CR2E034 (10/97)