

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

96 APR 29 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J76946 (9)

1. Corporation Name

T.H. SPACECOAST MANAGEMENT, INC.

Principal Place of Business

100 SUMMIT LAKE DRIVE
VALHALLA NY 10595

Mailing Address

100 SUMMIT LAKE DRIVE
VALHALLA NY 10595

800001798998

-04/29/96--01067--015

****200.00 ****200.00

3. Date Incorporated or Qualified 06/10/1987 3a. Date of Last Report 12/04/1995

4. FEI Number 59-2818041 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 for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Zip

Country

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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

Marcia A. Harner

Marcia A. Harner, Assistant Secretary 4/26/96

Signature, typed or printed name of registered agent, if not applicable

Signature, typed or printed name of registered agent, if not applicable

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
DC	TOLLMAN, STANLEY S.	100 SUMMIT LAKE DR.	VALHALLA NY	☐
DP	HUNDLEY, MONTY D.	100 SUMMIT LAKE DR.	VALHALLA NY	☐
DVS	FREEDMAN, SANFORD	100 SUMMIT LAKE DR.	VALHALLA NY	☐
				☐
				☐
				☐

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	☒ Change ☐ Addition
		1886 Route 52	Hopewell Junction N.Y. 12533	☒
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	☒ Change ☐ Addition
		1886 Route 52	Hopewell Junction N.Y. 12533	☒
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	☒ Change ☐ Addition
		1886 Route 52	Hopewell Junction N.Y. 12533	☒
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	☐ Change ☐ Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	☐ Change ☐ Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I do 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:

Sanford Freedman, Secy.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

914 223-3603

CR2E034 (12/95)