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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

(9)

1. Corporation Name TUFFORD DEVELOPMENT OF DAYTONA BEACH SHORES, INC

•					
Principal Place of Business Mailing Address					
2528 THICKET RIDGE COURT SUITE 100 LONGWOOD FL 32779 US		2528 THICKET RID SUITE 100			
		LONGWOOD FL 3 US	2//9	 Date incorporated or Qualified 06/29/1987 	04/25/1995
2. Principal Plac	e of Business	2a. Mailing Address		4. FET Number 59-2822500	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Oity & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23] Zip	Country	Zip	Country 30	8. This corporation has liability for	or intangible tax under s. 199.032, es. No
24	9. Name and Address of Current	29 Registered Agent		10. Name and Address of New	Registered Agent
	9, Marile and Address of Current	inchistored Adelic	81 Nar		
MILLER, ROBERT E.			82 Stre	t Address (P.O. Box Number is Not Acceptable)	
990 DOUGLAS AVENUE Suite 102			83	4433	
ALTAMONTE SPRINGS FL 32714			84 City	<u> </u>	FL 85 Zip Code
	o the provisions of Sections 607.0502 and agent, or both, in the State of Florida in, and accept the obligations of, Section			d corporation submits this statement for the on's board of directors. I hereby accept the a	purpose of changing its registered office in oppointment as registered agent. I am
CICNATURE	Alguset was typical on printed more of high second agreet a		MOTE From head April September	Kurenne production of a first	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO C	DEFICERS AND DIRECTORS IN 12
TITLE	PDT	DELETE	I 1 TITLE		Change Addition
NAME	TUFFORD, JERRY M.		1.2 NAMÉ		
STREET ADDRESS	2528 THICKET RIDGE COUP	îT .	1 3 STREET ADDR	ESS	
CITY - ST - ZIP	LONGWOOD FL		1.4 C(TY - ST - Z)P		
TITLE	S	DOLETE	2 1 fillef		☐ Change ☐ Addition
NAME	TUFFORD, CAROLYN K.		2.2 NAME		
STREET ADDRESS	2528 THICKET RIDGE COU	₹	2.3 STREET ADDR	ess	
CITY - S* - ZIP	LONGWOOD, FL.L		24 CHY-ST ZIP		Change Addition
TITLE		DELETE	3 1 TI'LE		Change C Addition
NAME	10		3.2 NAME		
STREET ADDRESS			3 3 STEEL LADD		
CITY - ST - ZiP		F3 00 510	3.4 C(1) - ST - Z(P		Change Addition
TITLÉ		DELETE	4 1 TillE		
NAME			4.2 NAME	nree	
STREET ADDRESS			4.3 STHELT ADDR		
C:TY-ST-ZiP		LI DELETE	44 City St-246 5 1 Title		Change Addition
TITLE		[] DELETE	5.2 NAME		<u>-</u>
NAME			5.3 STREET ACO	RF 52	
STREET ADDRESS			5.4 CITY - SY - ZIE		
CITY-ST-ZIP		DELETE	6 1 TITLS		Criange Addition
TATLE			6.2 NAME		
NAME			63 STREET ADD	OFFSS .	
STREET ADDRESS			6.4 CHY - ST. ZII		

14. If do hereby certify that the information suggied 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 bits annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early 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 AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-774-3118

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