


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

FILED

Jan 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # K02628 (1)</b> 1. Corporation Name <b>TOTAL SITE DEVELOPMENT, INC.</b>					
Principal Place of Business <b>2308 E. CENTRAL BLVD ORLANDO FL 32803 US</b>			Mailing Address <b>2308 E. CENTRAL BLVD ORLANDO FL 32803 US</b>		



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>6310 Yucatan Drive</b> Suite, Apt. #, etc. 22 <b>Orlando, Florida</b> City & State 23 Zip <b>32807</b> Country <b>US</b>				2a. Mailing Address 26 <b>6310 Yucatan Dr.</b> Suite, Apt. #, etc. 27 <b>Orlando, Florida</b> City & State 28 Zip <b>32807</b> Country <b>US</b>				3. Date Incorporated or Qualified <b>11/18/1987</b>							
				4. FEI Number <b>59-2861344</b>				Applied For <input type="checkbox"/> Not Applicable							
				5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required							
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				<b>\$5.00</b> May Be Added to Fees							
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
9. Name and Address of Current Registered Agent <b>SHACKELFORD, TERRI 2308 E. CENTRAL BLVD. ORLANDO FL 32803</b>								10. Name and Address of New Registered Agent 81 Name <b>Danny McConnell</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>6310 Yucatan Drive</b> 83 84 City <b>Orlando</b> FL 85 Zip Code <b>32807</b>							

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 Danny McConnell Danny McConnell Pres./Sec 1-9-98  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PS	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SHACKELFORD, TERRI		1.2 NAME	Danny McConnell			
STREET ADDRESS	2308 E CENTRAL BLVD		1.3 STREET ADDRESS	6310 Yucatan Dr			
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	Orlando, FL 32807			
TITLE		<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			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: Danny McConnell Danny McConnell Pres./Sec 1-9-98 407-898-4838  
Signature and typed or printed name of signing officer or director Date Daytime Phone # 0092498

CR2E034 (10/97)