

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -8 PM 3:29

DOCUMENT # K82812

(4)

1. Corporation Name

TMJ MOUNTAIN PROPERTIES, INC.

Principal Place of Business

32640 KNOXWOOD LANE
P.O. BOX 21
SAN ANTONIO FL 33576-0021
US

Mailing Address

32640 KNOXWOOD LANE
P.O. BOX 21
SAN ANTONIO FL 33576-0021
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/24/1989

3a. Date of Last Report
03/22/1994

2. Principal Place of Business

21 1900 LAND O' LAKES BLVD.

Suite, Apt. #, etc.

22 SUITE 104

City & State

23 LUTZ, FLA.

Zip

24 33549

Country

2a. Mailing Address

26 1900 LAND O' LAKES BLVD.

Suite, Apt. #, etc.

27 SUITE 104

City & State

28 LUTZ, FLA. 33549

Zip

29 33549

Country

30

4. FEI Number

59-2946555

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

9. Name and Address of Current Registered Agent

FUTCH, MARTIN L.
32640 KNOXWOOD LANE
SAN ANTONIO FL 33576

10. Name and Address of New Registered Agent

81 Name

LINDA K. YOUNT

82 Street Address (P.O. Box Number is Not Acceptable)

1900 LAND O' LAKES BLVD.

83

SUITE 104

84 City

LUTZ

FL

85

Zip Code

33549

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

Sandra B. Mortham

(NOTE: Registered Agent signature required when reappointing)

Mar 1, 1995

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

FUTCH, MARTIN L.

STREET ADDRESS

32640 KNOXWOOD LN

CITY - ST - ZIP

SAN ANTONIO FL

TITLE

D

NAME

MOURFIELD, HEATHER A.

STREET ADDRESS

760 E GILCHRIST CT BX 11

CITY - ST - ZIP

HERNANDO FL

TITLE

D

NAME

YOUNT, JOHN F.

STREET ADDRESS

596 COLLEGE ST

CITY - ST - ZIP

MACON GA

TITLE

S

NAME

YOUNT, CYNTHIA M

STREET ADDRESS

1900 LANE O' LAKES BLVD.

CITY - ST - ZIP

LUTZ FL

TITLE

T

NAME

YOUNT, LINDA K

STREET ADDRESS

1900 LAND O' LAKES BLVD.

CITY - ST - ZIP

LUTZ FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 110.07(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 (changed, or on an attachment with an address).

SIGNATURE:

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

Mar 1, 1995 (901) 588-4448

Date

Daytime Phone #