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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # M86193 (3) 1. Corporation Name					
TROY DEAL, INC.					
Principal Place	of Rusinosa	Mailuo Adduna			FR WILL DIEN DIEN TIME BERIND BERIND BERIND BERIND
Principal Place of Business Mailing Address		5			
5432 106TH SEMINOLE F		5432 106TH ST., NOR Seminole FL 34642	тн		
				3. Date Incorporated or Qualified 06/20/1988	3a. Date of Last Report 08/04/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEt Number	Applied For
Suite. Apt. #	t ote	Suite, Apt. #, etc		59-2894518	Not Applicable
22	, etc	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
23	·	28		Trest Fund Contribution	Added to Fees
Zip	Country	Zijo	Country	8. This corporation has liability for	
24	25	29	30	· <del></del>	s No
	9. Name and Address of Cur	rent Hegistered Agent	81 Name	10. Name and Address of New I	Registered Agent
DEAL T	BOV.				
DEAL, TROY 5432-106TH STREET NO.			82 Street Adio	iress (P.O. Box Number is Not Accepta	ble)
	LE FL 34642		83		
OL.III.10	EE 1 E 0101E				
			84 Orty		FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0	502 and 607.1508, Florida Statut	es, trie above named corpo	pration submits this statement for the pu	rpose of changing its registered office
familiar with	h, and accept the obligations of, S	ection 607.0505, Florida Statuter	ed by the corporation's bo- i	ard of directors. Thereby accept the app	iointment as registered agent. Lam
SIGNATURE _	_ = = ===				
12.	Signature: types or proted name of registeres a OFFICE RIS	AND DIRECTORS	<ol> <li>Bog fired Agests gration reprint</li> <li>13.</li> </ol>		ICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1 : TPLF	ADDITIONS CHAISES TO OT	Change Addition
NAME	DEAL, TROY		1.2 NAME		
STREET ADDRESS	5432 106TH ST. N.		1.3 STREET ADDRESS		
CITY-S1-ZIF	SEMINOLE FL		1.4 CiTY - ST - 7iF		
TITLE	<b>ST</b>	☐ DELETE	2 1 THUE		Change Addition
NAME	<b>DEAL, LUCINDA</b>		2.2 NAME		
STREET ADOPESS	5432 106TH ST. N.		2.3 STREET ADDRESS		İ
CITY - ST - ZIF	SEMINOLE FL		2 4 City - St. Zift		
TITLE		□ DELETE	3 1 1 TLE		Change Maddition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3 4 CITY - ST - ZIF 4. 1 TITLE		Change Addition
NAME		Liberary	4.2 NAME		
STREET ADORESS			4 3 STREET ADDRESS		
CITY-S1-7IP			4 4 CITY - ST - ZH		
THLE		☐ DELFTE	5 TILLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-S1-ZIP			5.4 CHTV - ST - ZIP		
TITLE		☐ DELETE	6 1 TITLE		Criange Addition
NAM!			6.2 NAME		
STREET ADDRESS			823FDCA 133HTZ 6.8		
CITY-ST-ZIF	A CAN ALL AND SERVICE AND ALL		6 4 CF Y - ST - 7IP		
14. Too hereby	certify that the information supplie	sd with this fling is voluntarily furn	ished and does not qualify	for the exemption stated in Section 119	07(3)(k), Florida Statutes I further

1. Foo needy centry that the information supplied with this fining is voluntarily furnished and obes not quality for the exemption states in Section 119 07(3)(k), Florida Statutes I further certify that the information indicated on this annual report or suppliemental armore report is five and accounter and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this 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 association that an address.

**SIGNATURE:** 

LIRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR & DOLLARS

5/14/96

813 - 307 - Q&(Q