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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 18 1997 8:00am Secretary of State

	TH DIVERSIONS, INC	•			
Principal Place of Business	Ma	ling Address	400000000000000000000000000000000000000	7 3 D 5 1 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M	DELLI MOLLI, DIBID ILDID ILDIL INDI ENGLI
PO BOX 520517 LONGWOOD FL 32750 PO BOX 520517 LONGWOOD FL 327		BOX 520517 IGWOOD FL 32752-0517	,		
				3. Date Incorporated or Qualified 3 09/17/1993	a. Date of Last Report 02/02/1996
2. Principal Place of Business 21	2e.	Mailing Address		4. FEI Number 59-3206097	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		E. Cartificate of Status Decived	\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State	28	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	1 1	Ζφ	Country	8. This corporation has liability for intan	ngiblo tax under s. 199.032,
24 25 9. Name and	[29] Address of Current Registe		30	10. Name and Address of New Registe	
			81 Name		
BAKER, TERRY T			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
235 WEST CHURCH ST	REET				
LONGWOOD FL			83		
			84 City		FL 85 Zip Code
	ik dinamic of registered agent as ditale if				
12.	OFFICERS AND DIRECT	TORS	Begistered Agent signature requi	ifed when reassailing) D. AODITIONS/CHANGES TO OFFICERS	
TITLE PD	OFFICERS AND DIRECT		13.		
TITLE PD NAME BAKER, TER	OFFICERS AND DIRECT	TORS	13. 1.1 TITLE 1.2 NAME		S AND DIRECTORS IN 12
TITLE PD NAME BAKER, TERI STREET ADDRESS 235 WEST C	OFFICERS AND DIRECT RY T CHURCH STREET	TORS	13. 1.1 THLE 1.2 NAMI 1.3 STHEET ADDRESS		S AND DIRECTORS IN 12
TITLE PD NAME BAKER, TERI STREET ADDRESS 235 WEST C CITY-ST-ZIP LONGWOOD TITLE STD	OFFICERS AND DIRECT RY T CHURCH STREET FL	TORS	13. 1.1 TITLE 1.2 NAME		S AND DIRECTORS IN 12 Change Addition
TITLE PD BAKER, TERI STREET ADDRESS CITY-ST-ZIP LONGWOOD TITLE STD HAWES, ELA	OFFICERS AND DIRECT RY T CHURCH STREET) FL NINE	TORŠ DELETÉ	13. 1.1 THLE 1.2 NAMI 1.3 STHEEL ADDRESS 1.4 CHY-ST-ZIP		S AND DIRECTORS IN 12 Change Addition
TITLE PD NAME BAKER, TERI STREET ADDRESS 235 WEST C LONGWOOD TITLE STD NAME HAWES, ELA STREET ADDRESS 245 TIMBERI	OFFICERS AND DIRECT RY T CHURCH STREET FL NINE LANE TRACE	TORŠ DELETÉ	13. 1.1 TITLE 1.2 NAMI 1.3 STHEET ADDRESS 1.4 CHY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STHEET ADDRESS		S AND DIRECTORS IN 12 Change Addition
TITLE PD BAKER, TERI STREET ADDRESS CITY-ST-ZIP LONGWOOD TITLE STD HAWES, ELA STREET ADDRESS CITY-ST-ZIP LONGWOOD LONGWOOD	OFFICERS AND DIRECT RY T CHURCH STREET FL NINE LANE TRACE	TORS DELETÉ	13. 1.1 TITLE 1.2 NAMI 1.3 STHEET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STHEET ADDRESS 2.4 CITY-ST-ZIP		S AND DIRT CTORS IN 12 Change Addition Change Addition Change Addition
TITLE PD NAME BAKER, TERI STREET ADDRESS 235 WEST C CITY-ST-ZIP LONGWOOD TITLE STD NAME HAWES, ELA STREET ADDRESS 245 TIMBERI CITY-ST-ZIP LONGWOOD TITLE VD	OFFICERS AND DIRECT RY T CHURCH STREET FL VINE LANE TRACE	TORŠ DELETÉ	13. 1.1 TITLE 1.2 NAMI 1.3 STHEET ADDRESS 1.4 CHY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STHEET ADDRESS		S AND DIRECTORS IN 12 Change Addition
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TITLE PD NAME BAKER, TERI STREET ADDRESS 235 WEST C LONGWOOD TITLE STD NAME HAWES, ELA 245 TIMBERI LONGWOOD TITLE VD NAME BOND, DEWI STREET ADDRESS CITY-ST-ZIP LONGWOOD TITLE NAME BOND, DEWI 1355 BENNE LONGWOOD TITLE NAME	OFFICERS AND DIRECT RY T CHURCH STREET FL NINE LANE TRACE FL EY TT STREET	TORS DELETE	13. 1.1 TILE 1.2 NAMI 1.3 STHEET ADDRESS 1.4 CITY- ST- ZIP 2.1 TILE 2.2 NAME 2.3 STHEET ADDRESS 2.4 CITY- ST- ZIP 3.1 TILE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP 4.1 TILE 4.2 NAME		S AND DIRT CLORS IN 12 Change Addition Change Addition Change Addition Addition
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14. Ido 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.