## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION. ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

**FILED** 

Jun 24 1997 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

•	MIEN   # N9400 Name TIAN FOCUS CENTER CHU	OOO 135 1 (5) RCH. INC.		
0111110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• #	
Principal Piace	e of Business	Mailing Address		
400 RUFFEL ST. EATONVILLE FL 32751		5477 LIGHTHOUSE ROAD ORLANDO FL 32808-5913 US		
	·			3. Date Incorporated or Qualified 3a. Date of Last Report 04/10/1996
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State 23	8	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent
	9		81 Name	e
CARSON	i, allyson/(al) c		62 Street	of Address (P.O. Box Number is Not Acceptable)
5477 LIGHTHOUSE RD.				
ORLAND	O FL 32808		83	
	•		84 City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617 050	2 and 617 1508. Florida Statute	s the above-name	d corporation submits this statement for the nurroose of changing its registers
SIGNATURE	egistered agent, or both, in the State m familiar with and accept the oblige Signature, types of printed name of registered age	Carson		prporation's board of directors. I hereby accept the appointment as registored 4/29/97  The required when reinstating)  DAYE
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE <b>7</b>	Change Addition
NAME	IRADIES, GARCIA		1.2 NAME	Linda Bagley 2672 Kerwood Circle
STREET ADDRESS	4823 GRANSBACK STREET	<i>)</i>	1.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	DA JANGO, F 1 328/0 Change WAddition
TITLE	BUSBY, DAVE	DECEME		CLESTER GILTINOEKSON -
NAME	6742 CRESENT RIDGE RD.		2.2 NAME	6662-HAWKSMOOR LN.
STREET ADDRESS	ORLANDO FL 32810		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ORIANDO, FC. 37818
CITY-ST-ZIP	D	DELETE	31 TITLE ** T	Change Addition
NAME	CARSON, ALLYSON (AL) C	<del></del>	3.2 NAME	DO HAN CAPTON
STREET ADDRESS	5477 LIGHTHOUSE RD.		3.3 STREET ADDRESS	SHOO WINTHOUSE RE
CITY-ST-ZIP	ORLANDO FL 32808		3.4. CITY - ST - ZIP	101/mar 161. 22808
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addilio
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	☐ Change ☐ Additio
TITLE		CT DEFEIE	6.1 TITLE	Change Additio
NAME OTDEET ADORESS			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.