

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

APPROVED
AND
FILED

96 APR 29 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



200001798962
-04/29/96--01067--004
****200.00 ****200.00

PROFIT CORPORATION
ANNUAL REPORT
1996

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

DOCUMENT # P03827 (3)

1. Corporation Name

TOLLMAN-HUNDLEY KISSIMMEE, INC.

Principal Place of Business Mailing Address

100 SUMMIT LAKE DRIVE
3RD FLOOR NORTH
VALHALLA NY 10019
US

100 SUMMIT LAKE DRIVE
3RD FLOOR NORTH
VALHALLA NY 10019
US

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 1886 Route 52 27 1886 Route 52

23 Hopewell Junction N.Y. 28 Hopewell Junction N.Y.

24 Zip 12533 25 Country US 29 Zip 12533 30 Country US

3. Date Incorporated or Qualified 3a. Date of Last Report

10/25/1984 10/12/1995

4. FEI Number 58-1611415 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 10. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 Hays Street
TALLAHASSEE FL 32301

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 *Marcia A. Hawner* Marcia A. Hawner, Assistant Secretary 4/26/96

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
PD	HUNDLEY, MONTY D.	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10595		<input type="checkbox"/> DELETE			
VTD	TOLLMAN, ARNOLD	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10595		<input type="checkbox"/> DELETE			
VS	FREEDMAN, SANFORD	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10595		<input type="checkbox"/> DELETE			
V	ARO, THOMAS W.	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10595		<input type="checkbox"/> DELETE			
DC	TOLLMAN, STANLEY	100 SUMMIT LAKE DRIVE, 3RD FLOOR NORTH VALHALLA NY 10595		<input type="checkbox"/> DELETE			
				<input type="checkbox"/> DELETE			

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1886 Route 52 Hopewell Junction N.Y. 12533	
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1886 Route 52 Hopewell Junction N.Y. 12533	
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1886 Route 52 Hopewell Junction N.Y. 12533	
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1886 Route 52 Hopewell Junction N.Y. 12533	
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1886 Route 52 Hopewell Junction N.Y. 12533	
<input type="checkbox"/> Change <input type="checkbox"/> Addition			

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 119.07(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 if changed, or on an attachment with an address.

SIGNATURE: *Sanford Freedman* 4/23/96 914-223-3603

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR