SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P9300007547 (1)

TLC REALTY, INC.

Principal.	Place	of	Bu	ısin	ess	

DOCUMENT # 1. Corporation Name

Mailing Address

1145 SOUTH VOLUSIA AVENUE ORANGE CITY FL 32763

1145 SOUTH VOLUSIA AVENUE



ORANGE CITY FL 32763		ORANGE CITY FL 32763						
					3. Date incorporated or Qualified 01/29/1993	3a. Date of Last Report 05/01/1995		
	ace of Business	2a. Mailing Address	,	A	4. FEI Number		F+-	Applied For
	S. VOLUSIA AUE	26 1425 S. VO	1203/	9 HUE	59-3170197			Not Applicable
Suite, Apt #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Γ	•	Additional Required
City & State		City & State			5 Flating Compains Financias			
	GE CITY, FL	30 APANGE	270	FL	6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip	Country 1/ S. A	28 ORANGE O	Country	11.5.A	8. This corporation has liability for i	intangible ta		
24 32 74	3 25 VOLUSIA	29 .32763	30 WX	OSIA	Florida Statutes	~ ~ ~	No	D 130 001,
	9. Name and Address of Current				10. Name and Address of New Re	gistered Ag	jent	
BO	OHER, DENYSE C		81	Name				
	5 SOUTH VOLUSIA AVENUE		82 Street Addre		ess (P.O. Box Number is Not Acceptab	ole)		
	ANGE CITY FL 32763		["					
		i	83					
			84	City			85 Z ₁	p Code
				, O.,		FL	~	, 0000
					ration submits this statement for the pi			
agent far	n familiar with, and accept the obligat	ions of, Section 607.0505, Flo	umonzed by rida Statutes	r trie corporation s.	in's board of directors. I hereby accept	ruie appoint	illen as	registered
SIGNATURE								
	Signature, typed or printed name of registered agen			ent signafure require:		DATE		
12.	OFFICERS AND PTSD	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	JERS AND L	Change	
TITLE	BOOHER, DENYSE C	L DELETE	11 TITLE			L] Change	: [] Mudical
NAME	1656 PARK AVENUE		1.2 NAME					
STREET ADDRESS	ORANGE CITY FL			T ADORESS				
CITY-ST-ZIP TITLE	SD SD	X DELETE	1.4 CITY - 2.1 TITLE	S1 - ZiF			Change	e Addition
NAME	FIELDS, JIM	DEC. 12	2.2 NAME				,	
STREET ADDRESS	1192 GLEN FALLS RD.			T ADDRESS				
CITY-ST-ZiP	DELAND FL		2 4 CITY					
TITLE		DECETE	3 1 TITLE	3. 2			Change	e Additio
NAME		—	3 2 NAME					
STREET ADDRESS			3 3 STREE	T ADDRESS				
CITY-ST-ZIP			34 CiTY	ST-ZIP				
TITLE		DELETE	4.1 THE				Change	e Additio
NAME			4. 2 NAME	:				
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY -	ST - ZIP				
TITLE		DELETE	5 1 TITLE				Change	e Additio
NAME			5 2 NAME					
STREET ADDRESS			53STREE	T ADDRESS				
CITY-ST-ZIP			5 4 C(1) -	ST-ZIP				
TITLE		DELETE	6.1 TITLE] Change	e Additio
NAME			6 2 NAME					
STREET ADDRESS			63STREE	I ADORESS				
CITY-ST-ZIP			6.4 CITY -					
further ce made und	rtify that the information indicated on t	his annual report or suppleme r of the corporation or the rece	ental annual eiver or trust	report is true ar	fy for the exemption stated in Section and accurate and that my signature shall to execute this report as required by the section of the execute this report as required by the section of the execute this report as required by the execute the e	all have the s	samo leg	al effect as if