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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # P93000059507 (2)

1. Corporation Name
TEM, INC.

700001399917
-02/08/95--01008--018
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
4400 CHARLOTTE ST LAKE WORTH FL 33461	4400 CHARLOTTE ST LAKE WORTH FL 33461

3. Date Incorporated or Qualified: 08/25/1993
3a. Date of Last Report: 06/09/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 65-0435571 ☐ 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

CROUCH, ROBERT O JR.
4400 CHARLOTTE ST
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent

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: Robert O. Crouch Jr. (Robert O. Crouch, JR.) 2-1-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	S	☒ Change ☐ Addition
NAME	BICKOM, JOHN	1.2 NAME	Bickom, Hope E.	
STREET ADDRESS	11821 66TH ST., N	1.3 STREET ADDRESS	217 ANITA Rd.	
CITY-ST-ZIP	W. PALM BCH. FL	1.4 CITY-ST-ZIP	West Palm Beach, Fl.	
TITLE	VP	2.1 TITLE	P	☒ Change ☐ Addition
NAME	DANHOFF, LAWRENCE	2.2 NAME	Danhoff, Lawrence	
STREET ADDRESS	2928 RANCH HOUSE RD.	2.3 STREET ADDRESS	2928 Ranch House Rd.	
CITY-ST-ZIP	W. PALM BCH. FL	2.4 CITY-ST-ZIP	W. Palm Bch., Fl.	
TITLE	ST	3.1 TITLE	VPT	☒ Change ☐ Addition
NAME	CROUCH, ROBERT O JR.	3.2 NAME	CROUCH, Robert O. JR.	
STREET ADDRESS	4400 CHARLOTTE ST.	3.3 STREET ADDRESS	4400 Charlotte St. "B"	
CITY-ST-ZIP	LAKE WALES FL	3.4 CITY-ST-ZIP	Lake Worth, Fla.	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		Re

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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robt O Crouch VPT 2-1-95 407-439-6576
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #
Robert O. Crouch, JR.

0270880 CP