FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000019929 (6)

TITAN 545, INC.

SIGNATURE:

Principal Place	e of Business	Mailing Address				1 10011001 110 10111 SIBIT ADVIT DRINK BOLL DOLDS SIBID ID110 SIRES ID11 1001			
2281 LEE RD. SUITE 103		2281 LEE RD. SUITE 103							
WINTER PARK	FL 32789	WINTER PARK FL 32789	7206						
						3. Date Incorporated or Qualified 03/15/1994	3a. Date	of Last R 5/1996	eport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26				59-3229533 Not Applicab			
Suite, Apt	#, etc.	Suite, Apt. #, etc.				Certificate of Status Desired			Additional equired
City & State	C	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23 Zip	Country	28	T Co	ountry		8. This corporation has liability for in	ntangihin ta		
24	25	29	30			Florida Statutes	Yes 🔲		. 155.032,
5-7	9. Name and Address of Curren		1001	7		10. Name and Address of New Reg			
QE(81	Name		<u></u>		
SECRIST, ROBERT L III									
2281 LEE AD.				82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 103 WINTER PARK FL 32789				83					
AAIIA	HER PARK FL 32/09								
		•		84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the	abov	e-named cor	poration submits this statement for the p	urpose of c	hanging if	ts registered
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was	: authoriz	ed by	the cornora	ation's board of directors. I hereby accept	at the appoir	ntment as	registered
	an familiar with, and accept the obliga	anons of section our coods, t	IOHOA SI	aiuio	.				
SIGNATURE	Signature, typed or printed name of registered age	or and tile if applicable (NC	TE Registe	red Age	nt signature requ	ired when reinstating)	DATE		
12.	OFFICERS ANI	D DIRECTORS	13			ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR	RS IN 12
THILE	P	DELETE	1.1	TITLE			L	Change	Addition
NAME	AVERY, DELBERT W		1.2	NAME					
STREET ADDRESS	2281 LEE RD., SUITE 103		1.3	STREET	ADDRESS				
CITY-SI-ZIP	WINTER PARK FL		1.4	CITY - S	T-ZIP				
TILE	VPS	DELETE		TITLE			Ľ	Change	Additio
NAME	PIETKIEWICZ, STANLEY T		2.2	NAME					
STREET ADDRESS	2281 LEE RD., SUITE 103	•	23	STAEET	ADDRESS				
CITY-ST-ZIP	WINTER PARK FL		- 1	CITY-	· I		•		
TITLE	VPT	☐ DELETE		TITLE	··· •·		L	Change	Additio
NAME	SECRIST, ROBERT L III		32	NAME	i	·		- •	
STREET ADDRESS	2281 LEE RD., SUITE 103				ADDRESS				
CITY - ST - ZIP	WINTER PARK FL			CITY-:					
TITLE	VIIVIENTANNE	DELETE		TITLE	31-11			Change	Additio
NAME				NAME		•	_		
STREET ADDRESS					ADDRESS				
				CITY-S					
CITY-ST-ZIP TITLE		☐ DELETE		TITLE	11-611-			Change	Addition
NAME		had week!		NAME				_ uangu	/100/100
					ADDRESS				
STREET ADDRESS]				1				
CHTY-ST-ZIP		DELETE		CITY-S	11-ZIP		т	Change	Addition
TITLE		[""] pereig		TITLE				T CHAILING	L. Aubidol
NAMÉ				NAME					
STREET ADDRESS			6.3	STREET	ADDRESS				
CITY OF THE	I .			Off V	w was I				

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 607, Florida Statutes; and that my name

2-10-97