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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000029614 (2)

TLG PARTNERS, INC.

FILED Feb 28 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Address					a nodinodi nio ibili bibli abeli dolfa dolfa dola nenio ibila dila dibi ilon sida ida.				
%WALKER & KI 10151 DEERWO JACKSONVILLE	OOD PARK BLVD BLDG 100 #200	%WALKER & KOEGLER, P.A. 10151 DEERWOOD PARK BLVD. BLDG 100 #200 JACKSONVILLE FL 32256			200						
US	-	US					3. Date incorporated or Qualified 04/18/1994	1	e of Last R 0/1996	eport	
2. Principal Pl	ace of Business	2a. Mailing /	Address				4. FEI Number		Ar	oplied For	
21		26					59-3236987 Not Applicable				
Suite. Apt.	#, etc.	Suite, Ap	ot. #, etc.				5. Certificate of Status Desired			Additional equired	
City & State	3	City & Si	tale				8. Election Campaign Financing		\$5.00	May Be	
23		28					Trust Fund Contribution			to Fees	
Zip	Country Zip			Country			8. This corporation has liability for i			. 199.032,	
24	25 29 30			10			Florida Statutes 🔲 Yes 🔀 No				
	9. Name and Address of Curren	it Registered Ag	ent				10. Name and Address of New Re	gistered A	gent		
WAL	KER, JAMES V.			81	Nar	ne					
10151 DEERWOOD PARK BLVD BLDG 100 SUIT2 200					Stre	et Addre	ddress (P.O. Box Number is Not Acceptable)				
	KSONVILLE FL 32256			83						-	
				84	City	<i>i</i>	**************************************		85 Zip	Code	
L					<u> </u>		oration submits this statement for the p	FL	<u> </u>		
office or n	egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida, Such i	change was au	thorized by	y the o	corporati	on's board of directors. I hereby accep	t the appo	intment as	registered	
	Signalize Type dioriprimed harne of register, diagram	or and tile if applicable	(NOTE:	Flagistered Ag	eni sign	alure require	ed when reinstaling)	DATE			
12.	OFFICERS AN	D DIRECTORS		13.		. ,	ADDITIONS/CHANGES TO OFFIC				
TITLE	D	Ĺ	DELETE	1,1 TITLE		ା -P	:		Change	Addition	
NAME	Goslin, teri l			1.2 NAME		'				}	
STREET ADDRESS	10151 DEERWOOD PARK BLV	'd bldg 100 st	TE 200	, 1.3 STREET	i addre	ss					
CiTY - ST - ZIP	JACKSONVILLE FL			1,4 CITY-1	ST-ZIP					Ĭ	
THLE	S		DELETE	2.1 TITLE					Change	Addition	
NAME	MCCLAEB, MARSHA M			2.2 NAME		1					
STREET ADDRESS	10151 DEERWOOD PARK BLV	D BLDG 100 S	TE 200	2.3 STREET	T ADORE	ss					
CITY - ST - 7IP	JACKSONVILLE FL			2.4 CITY-	ST-ZIP	1					
THILE			DELETE	3 1 TITLE					Change	Addition	
NAME				3.2 NAME		ł					
STREET ADDRESS				3.3 STREE	T ADORE	ss					
CDY-ST-ZIF				34. CITY-		}					
TITLE			DELETE	4.1 TITLE		<u> </u>			Change	Addition	
NAME				4 2 NAME							
STREFT ADDRESS				4.3 STREE		ss					
City-St-202				4.4 CITY-							
TifLE			DELETE	5.1 TITLE					Change	Addition	
NAME		_		5 2 NAME							
STREET ADDRESS				5.3 STREE		ss					
				5.4 CITY -							
CITY+ST ZIP TITLE			DELETE	6.1 TITLE	JI-EIP				Change	Addition	
NAME		L.		6.2 NAME					4. W. 184	tind - Morroll	
				6.3 STREE		ec l					
STREET ADDRESS						.33					
C(1y+S1-ZIP	by partile that the internation of make	d with the files of	toon not qualify	6.4 CITY		no etatoo	in Section 110 07/3/// Floride Statedo	e I further	oorlika thal	the	

1. Edo hereby certify that the information supplied with this filing does not quality 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 fine receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or B'ock 13 if changed or organ attachment with an address.

SIGNATURE

HAT THE MAN TYPED ON BRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/99

520-425-7782