## \_\_\_File now: filing fee after may 1 is \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 04 1997 8:00am

Secretary of State

Secretary of State 

DIVISION OF CORPORATIONS

## POCUMENT # P94000039028 (3)

TERRYCOMM OF MELBOURNE, INC.

Principal Place of Business Mailing Address 4155 DOW ROAD P.O. BOX 361725 MELBOURNE FL 32936-1725 UNIT K MELBOURNE FL 32934 3a. Date of Last Report 3. Date incorporated or Qualified 05/24/1994 01/22/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-3245 133 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Ζıρ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PLATT, JACK L **525 STRAWBRIDGE AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) MELBOURNE FL 32901 83 Zip Code 84 City 85 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. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Sign in religious or present naise of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 MILE THE Smith, terry r 1.2 NAME NAME: 1881 JEFFERSON AVENUE 1.3 STREET ADDRESS STREET ADDRESS MELBOURNE FL 32935 1.4 City-St-ZiP City-S1-7iP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAM 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CHY-\$1-70 Change Addition DELETE 3.1 TITLE TITLE 3 2 NAME HALLE 3.3 STREET ADDRESS STREET ADDRESS 3.4 City-St-7iP Ch Y- \$1-7-2 Change ☐ Addition DELETE THE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CHY-SI-72 DELETE Change Addition 51 TITLE TILF 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5 4 CITY - ST - ZIP CHY-ST-ZIP DELETE ☐ Change Addition 61 TITLE TillE 6.2 NAME NAM( 6.3 STREET ADDRESS S1REET 4001±55 6.4 CITY-ST-ZIP CITY - ST- ZIP 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 trusted 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.