

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000086274 (5)**

1. Corporation Name

**TKD INVESTMENTS, INC.**



Principal Place of Business

16320 FRONT BEACH ROAD  
PANAMA CITY BEACH FL 32413  
US

Mailing Address

16328 FRONT BEACH RD  
PANAMA CITY FL 32413

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip County

28. Zip County

24. 25.

29. 30.

9. Name and Address of Current Registered Agent

DAHN, THOMAS R  
16328 FRONT BEACH RD  
PANAMA CITY FL 32413

3. Date Incorporated or Qualified

11/23/1994

3a. Date of Last Report

03/10/1995

4. FEI Number

59-3281420

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

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 607.0602 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

(Print, Type, or Stamp Appropriate to the Situation)

DATE

12. OFFICERS AND DIRECTORS

12.1	D	<input type="checkbox"/> DELETE
NAME	DAHN, THOMAS R	
STREET ADDRESS	16328 FRONT BEACH RD	
CITY, ST, ZIP	PANAMA CITY FL 32413	
12.2	D	<input type="checkbox"/> DELETE
NAME	DAHN, KARLA D	
STREET ADDRESS	16328 FRONT BEACH RD	
CITY, ST, ZIP	PANAMA CITY FL 32413	
12.3		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
12.4		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
12.5		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	1.2 NAME	
13.3	1.3 STREET ADDRESS	
13.4	1.4 CITY, ST, ZIP	
13.5	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	2.2 NAME	
13.7	2.3 STREET ADDRESS	
13.8	2.4 CITY, ST, ZIP	
13.9	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	3.2 NAME	
13.11	3.3 STREET ADDRESS	
13.12	3.4 CITY, ST, ZIP	
13.13	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14	4.2 NAME	
13.15	4.3 STREET ADDRESS	
13.16	4.4 CITY, ST, ZIP	
13.17	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18	5.2 NAME	
13.19	5.3 STREET ADDRESS	
13.20	5.4 CITY, ST, ZIP	
13.21	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.22	6.2 NAME	
13.23	6.3 STREET ADDRESS	
13.24	6.4 CITY, ST, ZIP	

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)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement's annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 13.4 (change only) or an attachment with an address.

SIGNATURE: *Karla D Dahn* KARLA D DAHN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-96 904-234-5965  
DATE REGISTERED OFFICE PHONE NUMBER

CR2E034 (12/95)