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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

**FILED** 

May 06 1997 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9400088081 (2)

TK HOMES, INC.

Principal Place of Business Mailing Address							BBIII BBIII BBIBI	IBABE HUKU BUTUK IBAB	
1115 E LIVINGSTON 8T 1115 E LIVINGSTON ST									
ORLANDO FL S			ORLANDO FL 32903-5717						
						3. Date Incorporated or Qu	ualified 3a.	Date of Last Re	eport
						01/01/1995	1 (	04/27/1996	<i></i>
2. Principal Pl	ace of Business	2a. Mailing /	Address			4. FEI Number			plied For
21		26				59-3279847		No	t Applicable
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Des	ired 🗀	\$8.75 /	Additional
22		27				Vi Cerimente di Gialda Des		Fee Re	equired
City & State	9	City & S	City & State			6. Élection Campaign Final	ncing	\$5.00	May Be
23		28				Trust Fund Contribution	<u>L</u>	Added t	
Zip	Country		Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes □ Ves □ No			
24	9. Name and Address of Curre	29		30		Florida Statutes			
154	<del></del>		10. Name and Address of New Registered Agent  81 Name						
LEARY, WILLIAM N					WILLIAM N LEARY				
	PALMER AVENUE		82 Street Ad			ress (P.O. Box Number is Not Acceptable)			
AANA	TER PARK FL 32789			1	33 ///5	E LIVINGST	، د ۱۰۰	<u>,                                      </u>	
				[8	City			EL 85 Zip (	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.				s the ah	nve-named cor	poration submits this statement		e of changing its	s registered
office or re	egistered agent, or both, in the Sta	te of Florida. Such	change was a	ulhorized	by the corpora	ition's board of directors. I heret	by accept the	appointment as	registered
		-			_		ul.	- 12-	
SIGNATURE Signature, typed or printed name of regigner progress and tide if applicable (NOTE Re				Registered	Agent signature requ	Y MES ired when roinstating)		5/27	
12.	OFFICERS A	ND DIRECTORS		18.	<del></del>	ADDITIONS/CHANGES T	O OFFICERS .	AND DIRECTOR	IS IN 12
TITLE	DST		DELETE	1.1 TITL	E			Change	Addition
NAME	LEARY, TAMRA P			1.2 NAN	1E				
STREET ADDRESS 1100 PALMER AVENUE		1.3 STF			EET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL	· · · · · · · · · · · · · · · · · · ·	1.4 CITY-ST-ZiP		(-ST-ZIP				
TITLE	PD DELETE		DELETE	21 1/10	E			Change	Addition
NAME	LEARY, WILLIAM N.			27 NAM	1E				
STREET ADDRESS	1100 PALMER AVENUE			2.8 STR	CET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL		DELETE		Y-ST-7IP				T Addition
TITLE	VD	L	DELETE	3.1 1111				Change	Addition
NAME	WISE, KAREN P.			3.2 NAM					
STREET ADDRESS	136 OAKDALE ST. WINDEMERE FL				EET AODRESS				
CITY-ST-ZIP TITLE	THINDEMENS PL		DELFTE	3.4. CIT 4.1 TITU	Y-SI-ZIP			☐ Change	Addition
NAME		L		4.1 IIIL				ondrige	
STREET ADDRESS									
CITY-ST-ZIP					FET ADDRESS 7-ST-ZIP				
TITLE		<b>_</b>	DELETE	5.4 TITL				Change	Addition
NAME				5.2 NAM	ì				
STREET ADDRESS					EE1 ADDRESS				
CITY-ST-ZIP					r-\$1-2IP				
TITLE		· · · · · · · · · · · · · · · · · · ·	DELETE	6.4 TITE		ALAN TELEVISION OF PROPERTY OF THE PERSON OF PROPERTY OF THE		☐ Change	Addition
NAME				6.2 NAM				-	
STREET ADDRESS					EE1 ADDRESS				
J				1					l

Too 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