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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040702 (9)

T. C. SALES OF TALLAHASSEE, INC.

FILED Apr 16 1997 8:00am Secretary of State



Suite, Apt #, etc:    Suite, Apt #, etc:   Suite, Apt #, etc:   City & State   City & State   Cuty & State   S	4 NATURAN YAN KAUN, BANN DANU BANU BANU BANU BANU BANU BANU NATUR NUKER NUKE IBAK	
3. Date incorporated or Qualified   3a. Date of LOS/23/1995   OS/23/1995   OS/23/19		
2. Principal Place of Flushess   2a. Mailing Address   4. FEI Number   59-3332530		
Suito, Apil #, citc:    Suito, Apil #, citc:   Suito, Apil #, citc:   Suito, Apil #, citc:   Suito, Apil #, citc:   City & State   City & State	Applied For	
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, A	Not Applicable	
City & State    City & State   City & State   City & State   City & State   City & State   Country   Zip	.75 Additional ee Required	
Ze	5.00 May Be	
23	dded to Fees	
S. Name and Address of Current Registered Agent  CARNES, ROBERT T JR 3510 NORTH MONROE STREET TALLAHASSEE FL 32303  82 Street Address (P.O. Box Number is Not Acceptable)  TALLAHASSEE FL 32303  83    84 City   FL    85    86 Street Address (P.O. Box Number is Not Acceptable)  The pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chang office or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointme agent am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. CITY ST ZIP  DELETE 1.1 TIBLE  1.2 NAME  ROBERT R. CARNES, JR. 3510 N MONROE ST TALLAHASSEE FL  DELETE 2.1 TIBLE  2.2 NAME  2.2 NAME  2.2 NAME  2.3 STREET ADDRESS  CITY ST ZIP  DELETE 3.1 TIBLE  2.2 NAME  3.3 STREET ADDRESS  CITY ST ZIP  DELETE 3.1 TIBLE  1.3 STREET ADDRESS  CITY ST ZIP  DELETE 4.1 TIBLE  1.4 TIBLE  1.5 CITY ST ZIP  DELETE 4.1 TIBLE  1.5 CITY ST ZIP  DELETE 4.2 NAME  4.2 NAME  4.3 SIRECT ADDRESS  CITY ST ZIP  DELETE 4.3 CITY ST ZIP  DE	der s. 199.032,	
CARNES, ROBERT T JR 3510 NORTH MONROE STREET TALLAHASSEE FL 32303  11. Prosumant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment of registered agent, or both, in this State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment of the purpose of the objection 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signame, Spread agent of pended function of right state of Florida Statutes.  12. OF FLOERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. STREET ADDRESS  SIGNATURE STORY  TALLAHASSEE FL  OBLETE  1.1 TITLE  ON  ON  ON  ON  ON  ON  ON  ON  ON  O		
STORMATURES TALLAHASSEE FL  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 change of change of the corporation and complete the obligations of Sections Of Sections Statutes.  SIGNATURE  12. OF FLORERS AND DIRECTORS  THE PST DELETE 11THE OF ROBERT R. CARNES, JR.  ROBERT R. CARNES, JR.  12. NAME  ROBERT R. CARNES, JR.  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  THE PST STANDARDS  CONSTRUCTION MONROE ST 13 SHRET ADDRESS  CONSTRUCTION STRUCTION MONROE ST 13 SHRET ADDRESS  CONSTRUCTION STRUCTION MONROE ST 13 SHRET ADDRESS  CONSTRUCTION MONROE ST 14 STRUCT ADDRESS  CONSTRUCTION STRUCTURE ST		
TALLAHASSEE FL 32303  83  64 City  FL 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 change 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 appointme agent. Tam familiar with and accept the obligations of Sections 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of change of the corporation's board of directors. I hereby accept the appointme agent and board agent agent and board agent agent and board agent		
B3   B4   City   FL   B5		
TIL. Pursuant to the provisions 607 0502 and 607 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointmend agent. I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE    Sequence   I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE   Sequence   I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE   Sequence   I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE   Sequence   I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE   Sequence   I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE   Sequence   I am familiar with and accept the obligations of Section 607 0505, Florida Statutes.  INOTE Responsed Agent signature required when reinstating)   DATE   DATE		
The Provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointmend agent. Lam lamiliar with and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE    Signature   Sig	Zip Code	
SIGNATURE    Signature   typed or prefer home of registered agent and that if applicable   INOTE Registered Agent signature required when reinstating)   DATE		
DELETE		
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CDY-ST-ZIP 6.4 CITY-ST-ZIP		

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 corporaty in or his 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 if charged on an attachment with an address.

SIGNATURE:

DOPPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 901-5N-1641