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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000021307 (9)**

TOTAL PROJECT MANAGEMENT, INC.

Principal Place of Business	Mailing Address					
9890 VICTORIA LN STE 204 NAPLES FL 33942 US	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/06/1996					
2. Principal Place of Business 21 SIL GAST MANNES 0779 AV	24. Mailing Address 526 511 CAST MINI	NESOTA AVE	4. FEI Number	Applied For Not Applicab		
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State DELAND FLORIDA	City & State DELAND F	LURIDA	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 32724 Zig Country USA	29 32724 30	USA	8. This corporation owes or has paid the current Personal Property Tax due June 30.			
9, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
HARE, DENNIS M 9000 VICTORIA LANE #204 NAPLES FL 34109		81 Name 82 Street Addre	iss (P.O. Box Number is Not Acceptable) AST MINNESOTA AU	5		
	and 607.1508. Florida Stalutes, the	84 City DEC	FL oration submits this statement for the purpose of ch	85 Zip Code 3Z7Z Y		

11. Pursuant to the provisions of Sections 607 (502) and 607 (1508, Florida Statutes, the above-named corporation is bushrist this statement for the purpose of changing its registered office or registered re			111	JECHN 1		-L 32	2724				
SIGNATURE 12. OF I ICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 9880 VICTORIA UN #204 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 9880 VICTORIA UN #204 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 9880 VICTORIA UN #204 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 14. CHY-ST-2IP 15. TITLE PSYT HARE, DENNIS M 15. TERET ADDRESS 15. TITLE PSYT HARE PSYT HARE, DENNIS M 15. TERET ADDRESS 15. TITLE PSYT HARE PSYT HARE, DENNIS M 15. TERET ADDRESS	11. Pursuant	to the provisions of Sections 607,0502 and 607,1508, Florida Stalutes,	the above-named	corporation submits th	is statement for the purpor	se of changing i	ts registered				
SIGNATURE 12. OF I ICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 9880 VICTORIA UN #204 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 9880 VICTORIA UN #204 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 9880 VICTORIA UN #204 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PSYT HARE, DENNIS M 12. NAME 14. CHY-ST-2IP 15. TITLE PSYT HARE, DENNIS M 15. TERET ADDRESS 15. TITLE PSYT HARE PSYT HARE, DENNIS M 15. TERET ADDRESS 15. TITLE PSYT HARE PSYT HARE, DENNIS M 15. TERET ADDRESS	office or registeregraphin, 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 opposition of 1000 Section 607 0505. Florida Statutes										
Delete D					412	7198					
DELETE	SIGNATURE	Signature, typed or printed name of registered agent and title if applicable (NOTE R			DA	TE.					
NAME HARE, DENNIS M 9880 VICTORIA UN #204 13 STREET ADDRESS 14 CITY-ST-ZIP TITLE Change Addition Additi	12.	OFFICERS AND DIRECTORS	13.	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.1 December and the the information supplied with this filling does not qualify for the exemption stated in Section 110 07(2)(i). Florida Statutes Lifetimes contify that the information						.,					

14. I 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 topoporation 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 if charged or on an attractment with an address.

SIGNATURE:

WHave

DENNIS M. HARE

4/27/98

904-740-0337

FILED

May 07 1998 8:00am

Secretary of State