## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000026186 (2)
1. Corporation Name

TERRA FIRMA ASSETS, INC.

Principal Place of Business Mailing Address

24 CATHEDRAL PLACE. SUITE 409 ST. AUGUSTINE FL 32084 24 CATHEDRAL PLACE, SUITE 409





ST. AUGUSTI	INE FL 32084	ST. AUGUSTINE FL 32084		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified		te of Last F	Report
					03/19/1996			·
	lace of Business	2a. Mailing Address	-		4. FEI Number		A	pplied For
21 238 West King Street 26 238 West K			ing Street		59 <del>-</del> 3408719		N	ot Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional
22		27	Oit & Otale				Fee R	equired
City & State City & State  23 St. Augustine, FL 28 St. August			ne FI		6. Election Campaign Financing			May Be
Zip Zip	Country	28 St! Augusti	Country		Trust Fund Contribution	<u> </u>		to Fees
24 32084	4 25 St. Johns			hns	8. This corporation owes or has pai Personal Property Tax due June	-	- · -	tangible ☐ No
	9, Name and Address of Current				10. Name and Address of New Reg			
MCGINNESS A.I. 81 Name								
24	McGuinness, A.J.							
ST.	82 Street Address (P.O. Box Number is Not Acceptable) 238 West King Street							
ı		83						
ı		, V '	24 0					
ı		41	<b>B4</b> City		Augustine	FL	85 36	084
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Wastatutes	the above-nan	ned corpo	ration submits this statement for the po	urpose of	changing i	ts registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, to the 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 ange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE								i
	Signature, typed or printed name of registered agent		Registered Agent sign	alure required	d when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE			₹S IN 12
TITLE	PC	☐ DELETE	1.1 TITLE	PC		j	Change	Addition
NAME MCGUINNESS, A.J. STREET ADDRESS 24 CATHEDRAL PLACE, SUITE 409			1.2 NAME	MC	Guinness, A.J.	_		
OT ALIGHOTHE EL GOODA			1.3 STREET ADDRE	SS Z3	8 West King Stree	t 2004		1
CITY-ST-ZIP	8T 8T	DELETE	1.4 CITY-ST-ZIP	St.	Augustine, FL 3		C= -	
TITLE NAME	KERPER, SUE	☐ DELETE	2.1 TITLE	ST		)	Change	Addition
ALCATHERDAL BLACE GUITE AND			22 NAME Kei		rper, Sue	_		- 1
OT AUGUSTINE EL BOSOA					8 West King Stree			
CITY-ST-ZIP TITLE	01: A00001111E 1 E 02004	DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	_ St	. Augustine, FL 3	2084	Change	1220
NAME			3.1 HALE 3.2 NAME	ŀ		ι	Change	Addition
STREET ADORESS								1
CITY-ST-ZIP			3.3 STREET ADDRE	ss				
TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE			<del></del>	Change	Addition
NAME	·		4.1 MILE 4. 2 NAME				overlige	V0010011
STREET ADDRESS			4.3 STREET ADDRE	ec				
CITY-ST-ZIP			4.4 CITY-ST-ZIP	~				
TITLE	F	DELETE	5.1 TITLE	+		<del></del>	Change	Addition
NAME	·	• • • • • • • • • • • • • • • • • • • •	5.2 NAME		3000022	:531	<b>163</b> .	
STREET ADDRESS	•		5.3 STREET ADDRES	ss	-07/30/:	97U)	11U4	U1U
CITY-ST-ZIP	· •		5.4 CITY-ST-ZIP	35	****169	5.00	****1	65.00
TITLE		DELETE	6.1 TITLE	_			Change	Addition
NAME		•	6.2 NAME			•		
STREET ADDRESS			6.3 STREET ADDRES	ss				ì
CITY-ST-ZIP			6.4 CITY-ST-ZIP					
14. Ldo hereb	y certify that the information supplied	vith this filing does not qualify f	or the exemption	n 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.								

7/21/97