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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED May 20 1998 8:00am Secretary of State

	MENT # P9600 TO Name TE DIVERSIFIED, INC.	00073190 (6)			
Principal Place of Business		Mailing Address		4 INDIVIDUAL INDIVIDUAL DIVIN ODEN DONN DONN ODEN DE	INDO TITOT TIDIO INITE NOTE INCE
3976 N MONROE ST		2828 REMINGTON GREEN, SOUTH			
TALLAHASSEE FL 32303 US		TALLAHASSEE FL 32308			
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
6 Principal F	Drop of Dunions	TAL NAME ADDITION		09/03/1996	
2. Principal Place of Business 21		26. Mailing Address 26. 39.76 N.Mor)	coo 51	4. FEI Number 59-3398324	Applied For
Suite, Apt. #. etc.		26 34 (6 N, M01) Suite, Apt. #, etc.	i de cr		Not Applicable \$8.75 Additional
22]		27		5. Certificate of Status Desired	Fee Regulred
City & Stat	10	Cily & State	•	6. Election Campaign Financing	\$5.00 May Be
23		28 Tallatassee	FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29 32,303	30 L-80n	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered	d Agent
GC	Dram, ernest v Jr		81 Name		
39	76 N MONROE ST		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32303			Jan Oli Oli Mac	aross (1.5. Box Mullion is Not Accoptable)	
			83		
			84 City		102 7 O-4
			OH City	F	L 85 Zip Code
office or agent. Fa			uthorized by the corpora rida Statutes. Registered Agent signature requ	poration submits this statement for the purpose ation's board of directors. I hereby accept the appropriate the purpose accept the appropriate the purpose accept the purpose the purpose accept the purpos	ppointment as registered
12.		ND DIRECTORS	I 13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	<u> </u>	☐ DELETE	1.1 DILE	The state of the s	Change Addition
NAME	GORAM, ERNEST V JR.		1.2 NAME		
STREET ADDRESS	\$976 NORTH MONROE STR	EET	1.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32303		1.4 CITY - ST - ZIP		
TITLE	D	☐ DELFTE	2.1 TOTLE		Change Addition
NAME	HOLT, JAMES O JR.		2.2 NAME		
STREET ADDRESS	3976 NORTH MONROE STR	EET	2.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32303		2 4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GILLIAM, ROBERT W JR.		3.2 NAME		
STREET ADDRESS	3976 NORTH MONROE STR	EET	3.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32303		3 4. CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		·	4.4 CHY-ST-ZIP		
TITLE		DELETÉ	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		[] DELFTE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

I nereby 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address