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CORPORATION



FILED Mar 25 1998 8:00am FLORIDA DEPARTMENT OF STATE

	JAL REPORT 1998	Secre DIVISION OF	tary of State		Secreta	ry of S	State
1. Corporation		0094390 (7)	<u> </u>			
THE TI	LE SOURCE, INC.				I INSKIPAL ALA INIO AKAL ARAL ARAL ARAL AR	111 2013 18 14 1818 1 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Principal Place of Business Mailing Address 3901 INDUSTRY BLVD 449 PENINSULAR DRIVE							
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LAKELAND FL 33811 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
			_		11/12/1996		
	lace of Business	2s. Mailing Address			4. FEI Number		Applied For
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			<u>59-34 14597</u>	\$9.7	Not Applicable 5 Additional
2	_	27			Certificate of Status Desired		Required
City & State	6	Cily & State			6. Election Campaign Financing		00 May Be
3 Zip	Country	Zip	Cou	ntrv	Trust Fund Contribution 8. This corporation owes or has pa		d to Fees
4]	25	29	30	,	Personal Property Tax due June	<u>~</u> ′	☐ No
	g, Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	gistered Agent	
	DRRISON, JOSEPH A			81 Name			
	00 SOUTH FLORIDA AVENUE #	13	ļ	82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)	
LAI	KELAND FL 33803		}	83		· · · · · · · · · · · · · · · · · · ·	
			ļ	84 City		- 85 Z	ip Code
				City		FL °° *	ip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stati	utes, the at	ove-named co	rporation submits this statement for the p		a its registered
SIGNATURE					rporation submits this statement for the pation's board of directors. I hereby acceptions when reinstation	purpose of changing of the appointment	g its registered as registered
SIGNATURE	Signature, typed or printed name of registered as				rporation submits this statement for the pation's board of directors. I hereby acceptured when reinstating) ADDITIONS/CHANGES TO OFFICE	purpose of changing the appointment	
SIGNATURE	Stoneture, typed or printed name of registered as OFFICERS AF	gent and tire if applicable (NC	OTE Registered	Agent signature req	uired when reinstating)	purpose of changing the appointment	ORS IN 12
BIGNATURE 12. HITLE HAME	Stoneture, typed or printed name of registered as OFFICERS AT PD PITMAN, JAMES E JR	gent and line if applicable (NO ND DIRECTORS	13. 1.1 Trī 1.2 NA	Agent signature req LE ME	uired when reinstating)	DATE DATE CERS AND DIRECT	ORS IN 12
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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 atlachment with an address.

2/18/90

941-1-41-88/6