## 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 # P97000039037 (1)

TGDS, INC.

## **FILED** Jan 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 3120 SANDALWOOD LANE 3120 SANDALWOOD LANE TITUSVILLE FL 32780 TITUSVILLE FL 32780 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/30/1997 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 12/10 Personal Property Tax due June 30. Yes Yes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HIGHTOWER, KEITH L 3120 SANDALWOOD LANE Street Address (P.O. Box Number is Not Acceptable) TITUSVILLE FL 32780 83 84 Zip Code 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 changing its registered 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE KEITH L. HIGHTOWER HIGHTOWER, KEITH L 1.2 NAME NAME 3120 SANDALWOOD LN 3120 SANDALWOOD LANE STREET ADDRESS 1.3 STREET ADDRESS TITUS VILLE, FL 32780 TITUSVILLE FL 32780 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE PERDUE, RANDOLPH. 2.2 NAME NAME PO BOX 27572 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4,4 CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 EAME NAME 5,3 FREET ADDRESS STREET ADDRESS Ty - ST - ZIP CiTY - ST - ZiP Change Addition DELETE 6.1 LE. 6.2 ME NAME STREET ADDRESS REET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the examption 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 disternmental to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if the page of the corporation of the c