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

1. Corporatio	MENT # S6039 TH HOLDINGS, INC.	6 (6)							
Principal Place of Business Mailing Address						T SADELE DE LIN MILITE MAINE SELVE SERVE		HI WEDE WIDIE	AIDU DIEN IDDI
5120 LYDIA COURT SPRING HILL FL 34606		5120 LYDIA COURT SPRING HILL FL 34808				DO NOT WRI	TE IN THI	S SPACE	
						3. Date Incorporated or Qualified	Ĺ		
5 Principal D	Manager of Developmen	A I I I - III - o A alabana				06/18/1991			1
2. Principal P	flace of Business	2a. Mailing Address	26			4. FEI Number			Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				59-3074862		\$8.7	5 Additional
22		27	27			5. Certificate of Status Desired	Ш		Required
City & State	е	City & State	City & State			8. Election Campaign Financing		\$5.0	00 May Be
23		28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has p		_ `	
24	25 25 Name and Address of Currer	29 29 Agent	30		1	Personal Property Tax due Jur 10. Name and Address of New F		Yes	∐ No
HEI	RSCH, I W DMD			B1 Na	ame .	19, 1300110 0010 01001000 01 11111	1081010		
	20 LYDIA COURT		-	82 St	st Addron	- (D.O. Day Aliyashor in Mol Appoint	- 1-1-1		
	RING HILL FL 34808		ľ	82 OI	reer Addres	s (P.O. Box Number is Not Accept	able)		
			[83					
				84 Ci	tv			. 85 Z	ip Code
					-		<u>F</u>		•
office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	2 and 607.1508, Fiorida Statute of Florida Such change was a ations of, Section 607.0505, Flo	es, the ab- authorized orida Statu	ove-na I by the ites.	med corpora corporation	ation submits this statement for the is board of directors. I hereby acc	purpose ept the ap	of changing opointment	g its registered as registered
SIGNATURE	Signature, typed or printed name of registered age	(NOTE	Dec obred						
12,	Signature, typod or printed name or registered ago OFFICERS AN		13.	Agent siy	nature required v	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	ID DIRECT	ORS IN 12
TITLE	OPT	DELETE	1 1 1170	LE		ADDITIONO/OF INTOLOTIC OF	IOLITO 7	Chang	
NAME	HERSCH, I. WARREN		1.2 NAN						· <u> </u>
STREET ADDRESS	5120 LYDIA COURT			REET ADDE	ESS				
CITY-ST-ZIP	SPRING HILL FL			Y-ST-ZIP					
TITLE	DVS	☐ DELETE	2.1 TITL					☐ Chang	ge 🔲 Addition
NAME	HERSCH, JANE MARIE		2.2 NAN	ΝE					
STREET ADDRESS	5120 LYDIA COURT		2.3 STR	EET ADDR	ŒSS				
CITY-ST-ZIP	SPRING HILL FL	Discrete		Y-ST-ZIF	1				
TITLE		☐ DELETE	3.1 TITL				•	∐ Chang	ge L Addition
NAME PARET ADDRESS			3.2 NAM						
STREET ADDRESS			•	EET ADDR					
CFTY-ST-ZIP TITLE		DELETE	3.4. CIT	Y-ST-ZIP F	'			Chang	ge Addition
NAME		had week	4. 2 NAF					L.J Ullding	,6 <u>ப</u> лиины
STREET ADDRESS				EET ADDR	FSS				
CITY-ST-ZIP				Y - ST - ZIP					
TITLE		DELETE	5.1 TITE			······································		Chang	je Addition
NAME			5.2 NAM	Æ					
STREET ADDRESS			5.3 STRE	EET ADDR	ESS				
CITY-ST-ZIP			5.4 CITY	r-ST-ZIP					
TITLE		DELETE	6.1 TITL	E				Chang	e 🔲 Addition

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 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.

6 3 STREET ADDRESS

STREET ADDRESS

FILED

Feb 04 1998 8:00am

Secretary of State