## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (0)**DOCUMENT #**  Corporation Name TYLUK, INC. Mailing Address Principal Place of Business 3730 E. SR 46 3730 E. SR 46 SANFORD FL 32771 SANFORD FL 32771 US 3a. Date of Last Report 3. Date Incorporated or Qualified 05/14/1992 04/04/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-3124364 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State  $\Box$ Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s 199.032, Country Zip Country Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BOYD, LOUIS H., JR 82 Street Address (P.O. Box Number is Not Acceptable) 3730 E. SR 46 83 WINTER PARK FL 32771 Zip Code City 85 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 (NO"E. Registered Agent signature required when reinstating) (12/95)Signature, typed or printed name of registered agent and title it applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1. 1 TITLE TITLE CR2E034 BOYD, LOUIS H., JR 1.2 NAME NAME 3730 E. SR 46 13 STREET ADDRESS STREET ADDRESS SANFORD FL 1.4 CHTY - ST - ZIP CITY-ST-ZIP [] Change ☐ Addition DELETE 2 1 TITLE TITLE KENNEDY, JANET 2.2 NAME NAME 3730 E. SR 46 2.3 STREET ADDRESS STREET ADDRESS SANFORD FL 24 CITY - ST - ZIP CITY-S1-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 DELE16 A 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP Addition DELETE 5. 1 TITLE TITLE NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CiTY-ST-ZIP CITY - ST - ZIF Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHTY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

OF SIGNING OFFICER OR DIRECTOR

4-28-96 (467)328-9096