

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 27 PM 4:02

DOCUMENT # 729097 (6)
1. Corporation Name
SARA-SEA OWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address
6708 SARA SEA CIRLCE SARASOTA FL 34242
6708 SARA SEA CIRLCE SARASOTA FL 34242

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/18/1974 3a. Date of Last Report 01/28/1994
4. FEI Number 59-1718819 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

ZARTMAN, THOMAS E
6708 SARA SEA CIRCLE
SARASOTA, FL
33581

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	ZARTMAN, THOMAS E	1.2 NAME	
STREET ADDRESS	6708 SARA SEA CRICLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000	1.4 CITY-ST-ZIP	
TITLE	ST	2.1 TITLE	☐ Change ☐ Addition
NAME	ZARTMAN, CLARA	2.2 NAME	
STREET ADDRESS	6708 SARA SEA CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000	2.4 CITY-ST-ZIP	
TITLE	VPD	3.1 TITLE	☐ Change ☐ Addition
NAME	GOLDSMITH, THOMAS L	3.2 NAME	
STREET ADDRESS	6708 SARA SEA CRICLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	KULGA, STANLEY	4.2 NAME	
STREET ADDRESS	1724 DAWN ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	RING, MARTIN	5.2 NAME	
STREET ADDRESS	2780 71ST ST CT. W.	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	HEIDRICH, RUSSELL	6.2 NAME	
STREET ADDRESS	6708 SARA SEA CIRCLE	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-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 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Thomas E. Zartman*
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR
THOMAS E. ZARTMAN PRESIDENT

1-23-95

8/3-349.7/30