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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 744767 (5)
Corporation Name
VOITURE LOCAL 797 SARASOTA COUNTY, INC.



Principal Place of Business: 159 AMERICAN LEGION WAY, VENICE FL 34284-8631
Mailing Address: 159 AMERICAN LEGION WAY, P.O. BOX 1631, VENICE FL 34284-8631

3. Date Incorporated or Qualified: 10/31/1978
4. FEI Number: 59-6151284
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. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

1. Principal Place of Business: Suite, Apt. #, etc., City & State, Zip, Country
2a. Mailing Address: Suite, Apt. #, etc., City & State, Zip, Country

9. Name and Address of Current Registered Agent: BRYANT, FRANK, 8696 CULBEBRA AVE, NORTHPORT FL 34287

10. Name and Address of New Registered Agent: 81 Name: MARLATT EDW., 82 Street Address: 6926 ROSLYN CT, 83, 84 City: NORTH PORT, FL, 85 Zip Code: 34287

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: EDWARD J. MARLATT P. Edward J. Marlatt, DATE: 1-21-98

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	RALPH BREEDEN	
STREET ADDRESS	217 HIGH POINT DR	
CITY-ST-ZIP	VENICE FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	METLER, FRED B	
STREET ADDRESS	2992 SUNSET BCH DR	
CITY-ST-ZIP	VENICE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	RICE, LAWRENCE	
STREET ADDRESS	170 MANESS RD	
CITY-ST-ZIP	VENICE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	THOMAS MORROW	
STREET ADDRESS	1608 VIKKI CT	
CITY-ST-ZIP	VENICE FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	WALLACE, FRANKLYN E	
STREET ADDRESS	809 CHURCH ST	
CITY-ST-ZIP	NOKOMIS FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MARLATT, EDW	
STREET ADDRESS	6926 ROSLYN CT	
CITY-ST-ZIP	NORTHPORT FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	KEY, RICHARD
3.3 STREET ADDRESS	1000 GONDOLA DR N
3.4 CITY-ST-ZIP	VENICE, FL 34293
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	KEWER, JOHN
4.3 STREET ADDRESS	517 NEPONSIT DR S
4.4 CITY-ST-ZIP	VENICE, FL 34293
5.1 TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	BRYANT, FRANK
5.3 STREET ADDRESS	8696 CULBEBRA AVE.
5.4 CITY-ST-ZIP	NORTH PORT FL 34287
6.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	DANIELS, RAYMOND D.
6.3 STREET ADDRESS	421 LAKE OF THE WOODS DR
6.4 CITY-ST-ZIP	VENICE FL 34293

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: FRANK BRYANT, DATE: 1/17/98, 941-426-5327

CR2E037 (10/97)