FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

764035

(2)

SARASUTA CONVENTION AND VISTORS BUREAU, INC.											
Principal Place	e of Business	Malling Address					I 100111 10010 STILL BIELL SPIED 11121 ST	li manda ninga bib at	AIDII DAUI	middl ifft	
% H. WILLIAM 1805 MAIN STE SARASOTA FL	EET #912	% H. WILLIAM SCOVILL 1805 MAIN STREET #912 SARASOTA FL 34236			L	 Date Incorporated or Qualified 07/06/1982 FEI Number 59-2189967 			lied For Applicable		
2. Principal Pi	ace of Business	2a. Mailing Address 28							.75 Ad ee Requ	lditional	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing Trust Fund Contribution		.00 Ma Ided to F			
City & State	9	City & State				7. Is this nonprofit corporation a homeowners association? Yes No					
Zip 24	Country 25	Zip 29	30 Co	untry			8. This corporation owes or has paid Personal Property Tax due June 3				
	9. Name and Address of Current	Registered Agent				1	Name and Address of New Reg	istered Agent			
				81	Name						
SCOVILI, H. WILLIAM				82 Street Address (P.O. Box Number is Not Acceptable))			
1605 MAIN STREET #912 SARASOTA FL 34236				83							
				84	City			F1 85	Zip Co	xde	
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 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								ging its re	registered gistered		
SIGNATURE											
	Signature, typed or printed name of registered agent			ed Age	nt signature r	required w	men reinetating)	DATE		193 40	
12.	OFFICERS AND	DELETE	13.	TTO P	Т		ADDITIONS/CHANGES TO OFFICE	RS AND DIRE		Addition	
NAME	MOLDAN, HOWARD			1.1 TITLE 1.2 NAME				ال الله	Kaliyo I	Addition	
STREET ADDRESS				1.2 NAME 1.3 STREET ADORESS						į	
CITY-ST-ZIP				1.3 STREET ADDRESS							
TITLE	GT DELETE		2.1 TITLE		1-ZIP			По	nanne	Addition	
NAME	STARR. LARRY			2.2 NAME				٠. س			
STREET ADDRESS				2.3 STREET ADDRESS							
CITY-ST-ZIP				2.4 CITY-ST-ZIP				17			
TITLE	D DELETE			ITLE		ST		□ CI	nange 👽	Addition	
NAME	MARTHALER, LARRY		3.2 N	3.2 NAME			ron Cunningham		- A	^	
STREET ADDRESS	655 N. TAMIAMI TRAIL		3.3 S	STREET	ADDRESS	103	O Sea Side Drive				
CITY-ST-ZIP	SARASOTA, FL 00000			CITY-S			asota 34242				
TITLE	D	DELETE	4.1 T				45014 34242	□ CI	nange	Addition	
HAME	O'HARA, JOHN		4.21	NAME							
STREET ADDRESS	1000 BLVD OF THE ARTS		4.3 \$	STREET.	ADDRESS						
CITY-ST-ZIP	SARASOTA FL		4.4 0	CITY - SI	T-ZIP						
TITLE	D DELETE		5.1 T	5.1 TITLE				C	nange	Addition	
NAME	PICCOLO, FRED	_	5.2 6	WAME	- 1						
STREET ADDRESS SARASOTA BRADENTON AIRPORT			5.3 STREET ADDRESS								
CITY-ST-ZIP	SARASOTA FL			CITY-S	T-ZIP						
TITLE		☐ DELETE	1	TITLE				c	nange	L.] Addition	
NAME			6.2 N	NAME	1						
APAGET 4 DADGE -				-							

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: Charles

Feb. 4. 1998 (941) 383-9505

FILED

Apr 10 1998 8:00am

Secretary of State