

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**PROFIT CORPORATION ANNUAL REPORT 1998**



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

**FILED**  
**Oct 08 1998 8:00am**  
**Secretary of State**

**DOCUMENT # J64813**

**(5)**

1. Corporation Name  
**22ND AVENUE ASSOCIATES, INC.**

Principal Place of Business  
**316 N-CASEY KEY ROAD 7350 S. TRAIL**  
**OSPREY-FL 34220 Sarasota, FL**  
**US 34231**

Managing Agent  
**JOHN PATTERSON**  
**46 NORTH WASHINGTON BOULEVARD #1**  
**SARASOTA FL 34236**



DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: **03/24/1987**
- 4. FEI Number: **59-2797628** Applied Fee: **\$8.75** Additional Fee Required:
- 5. Certificate of Status Desired:  Additional Fee: **\$5.00** May Be Added to Fee:
- 6. Election Campaign Financing:  Additional Fee:
- 7. This corporation owes or has paid the current year (beginning) Personal Property Tax due June 30:  Yes  No
- 10. Name and Address of New Registered Agent

- 2. Principal Place of Business:
  - 21. **7350 S. Tamiami Tr.**
  - 22. **# 82**
  - 23. **Sarasota FL**
  - 24. **34231**
- 26. Managing Agent:
  - 26. **JOHN PATTERSON**
  - 27. **SAME**
  - 28. **FL**
  - 29. **34231**
  - 30. **USA**

**PATTERSON, JOHN**  
**46 NORTH WASHINGTON BOULEVARD #1**  
**SARASOTA FL 33577**

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

11. Pursuant to the provisions of Sections 607.01(2) and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent. This notice in the State of Florida. Such change was authorized by the corporation's board of directors. I, hereby accept the appointment as registered agent of the corporation and I accept the responsibility of Sections 607.01(2) and 607.1506, Florida Statutes.

12. DELETIONS OF OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	<input type="checkbox"/> DELETE	1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS		2 ADDRESS	
CITY-STATE-ZIP		3 CITY-STATE-ZIP	
NAME	<input type="checkbox"/> DELETE	4 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS		5 ADDRESS	
CITY-STATE-ZIP		6 CITY-STATE-ZIP	
NAME	<input type="checkbox"/> DELETE	7 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS		8 ADDRESS	
CITY-STATE-ZIP		9 CITY-STATE-ZIP	
NAME	<input type="checkbox"/> DELETE	10 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS		11 ADDRESS	
CITY-STATE-ZIP		12 CITY-STATE-ZIP	
NAME	<input type="checkbox"/> DELETE	13 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS		14 ADDRESS	
CITY-STATE-ZIP		15 CITY-STATE-ZIP	
NAME	<input type="checkbox"/> DELETE	16 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS		17 ADDRESS	
CITY-STATE-ZIP		18 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing 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 registered agent; and that I am empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in the appropriate list of changes, or removals, of officers and directors.

SIGNATURE: *[Handwritten Signature]*

10/1/98

CP20024 (10/97)