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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000022792**1. Corporation Name

CARDINAL, CARLSON & PARKS ARCHITECTS, INC.

Principal Place	of Business	Mailing Address			ישעו יפון עוועו עופעו (נעון עועוו י
330 S PINEAPP		330 S PINEAPPLE BLVD			
204		204		DO NOT WRITE IN THIS	SPACE
SARASOTA FL 34236-3423 SARASOTA FL 34236-3423 US				3. Date Incorporated or Qualifed	OI AGE
US		03		03/10/1997	ì
2 Oringinal Di	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	5. Pineapple Ave	26 330 S. PINRA	rele Av	1 ···	Not Applicable
21 3 30 Suite, Apt.		Suite, Apt. #, etc.	<del>    -                                  </del>	_/	\$8.75 Additional
22 ZOL	_ ``	27 ZO4		5. Certificate of Status Desired	Fee Required
City & State		City & State	i	6. Election Campaign Financing	\$5.00 May Be
23 Savo	sota, th	28 Javosota,	<u>- L</u>	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	ountry	8. This corporation owes the current year Int	angible
24 54	25 77 05	29 34 6 56 30	<u> </u>	Personal Property Tax.	Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
CAD	SON MICHAEI		81 Name	<u> </u>	
CARLSON, MICHAEL 330 S PINEAPPLE AVE			82 Street A	Address (P.O. Box Number is Not Acceptable)	
204	S FINEAFFEE AVE		83	<del></del>	
	ASOTA FL 34236		03		
O/10	1001X 12 01200		84 City	FL	85 Zip Code
		and 607 1609 Florida Statutos the	above named (	corporation submits this statement for the nurnose of	changing its registered
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	michae	ed Agent sagnature re	quired when reinstating)  DATE	<u> </u>
12.	OFFICERS AND			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD		TITLE	PD	Change   Addition
NAME	CARDINAL, THOMAS	1.2	NAME (	CARDINAL, THOMAS	
STREET ADDRESS	2355 MILFORD CIR	1.3		2205 ARLINGTON ST.	
CITY-ST-ZIP	VENICE FL 34239	1.4	CITY-ST-ZIP	SARASOTA, FL 34239	
TITLE	VD	☐ DELETE 2.1	TITLE		☐ Change ☐ Addition
NAME	PARKS, DALE	2.2	NAME		
STREET ADDRESS	512 MADISON COURT	2.3	STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34236		CITY-ST-ZIP		DROLL CAUSE
TITLE	STD	☐ DELETE 3.1		STD CARLSON, MICHAEL	Change Addition
NAME	CARLSON, MICHAEL		10000	2355 MILFORD CIR	
STREET ADDRESS	3619 RHINE ST		STREET ADDRESS	SARASOTA, FL 34239	
CITY-ST-ZIP	SARASOTA FL 34234			SARASSIA, FC STRST	☐ Change ☐ Addition
TITLE		_	TITLE		
NAME			NAME		,
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		<del>-</del>	NAME		
NAME			STREET ADDRESS		ļ
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP			TITLE		☐ Change ☐ Addition
TITLE					,
		■ 6.2	NAME		1
NAME STREET ADDRESS			STREET ADDRESS		

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 Ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attackment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90141 024 \*\*\*158.75