

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

FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000082242 (3)
1. Corporation Name
WALTERS LEVINE BROWN KLINGENSMITH & MILONAS, P.A.



Principal Place of Business
~~240 S PINEAPPLE AVE, SUITE 400~~
~~SARASOTA FL 34236~~
1515 Ringling Blvd, Ste 900
SARASOTA, FL 34236

Mailing Address
P O BOX 1479
SARASOTA FL 34230-1479

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1515 Ringling Blvd Suite, Apt. #, etc. 22 Suite 900 City & State 23 SARASOTA FL Zip 24 34236	2a. Mailing Address 26 Same Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 USA	3. Date Incorporated or Qualified 09/22/1997 4. FEI Number 65-0786055 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 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILONAS, TASO M
~~240 S PINEAPPLE AVE, SUITE 400~~
SARASOTA FL 34236

1515 Ringling Blvd
Ste. 900

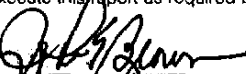
81 Name Same	82 Street Address (P.O. Box Number is Not Acceptable) 1515 Ringling Blvd, Ste. 900	83 84 City SARASOTA FL 85 Zip Code 34236
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 Taso M. Milonas  4/20/98
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 NAME STREET ADDRESS CITY - ST - ZIP	D WALTERS, JOEL W 1515 Ringling Blvd. 240 S PINEAPPLE AVE, SUITE 400 Ste. 900 SARASOTA FL 34236	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEVINE, STUART J 1515 Ringling Blvd. 240 S PINEAPPLE AVE, SUITE 400 Ste. 900 SARASOTA FL 34236	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BROWN, JOHN E 1515 Ringling Blvd. 240 S PINEAPPLE AVE, SUITE 400 Ste. 900 SARASOTA FL 34236	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KLINGENSMITH, JACK H 1515 Ringling Blvd 240 S PINEAPPLE AVE, SUITE 400 Ste. 900 SARASOTA FL 34236	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILONAS, TASO M 1515 Ringling Blvd 240 S PINEAPPLE AVE, SUITE 400 Ste. 900 SARASOTA FL 34236	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D THOMSON, JAMES E 1515 Ringling Blvd 240 S PINEAPPLE AVE, SUITE 400 Ste. 900 SARASOTA FL 34236	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

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

SIGNATURE: John E. Brown Pres.  4/20/98 944-364-8787
Signature, typed or printed name of signing officer or director Date Division Phone # 0440772

CR2034 (10/97)