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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **P97000082242 (3)**

1. Corporation Name
WALTERS LEVINE BROWN KLINGENSMITH & MILONAS, P.A

Principal Place of Business	Mailing Address
~~240 S PINEAPPLE AVE, SUITE 400~~ ~~SARASOTA FL 34236~~ 1515 Ringling Blvd., Ste 900 SARASOTA, FL 34236	P O BOX 1479 SARASOTA FL 34230-1479

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1515 Ringling Blvd	2a. Mailing Address 26 Same	3. Date Incorporated or Qualified 09/22/1997	
Suite, Apt. #, etc. 22 Suite 900	Suite, Apt. #, etc. 27	4. FEI Number 65-0786055	☐ Applied For ☐ Not Applicable
City & State 23 SARASOTA FL	City & State 28	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip 24 34236	Country 25 USA	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No	

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~~ 1515 Ringling Blvd Ste. 900 SARASOTA FL 34236	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

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 H. 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	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	WALTERS, JOEL W 1515 Ringling Blvd.	1.2 NAME	
STREET ADDRESS	~~240 S PINEAPPLE AVE, SUITE 400~~ Ste. 900	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34236	1.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LEVINE, STUART J 1515 Ringling Blvd.	2.2 NAME	
STREET ADDRESS	~~240 S PINEAPPLE AVE, SUITE 400~~ Ste.900	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34236	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BROWN, JOHN E 1515 Ringling Blvd.	3.2 NAME	
STREET ADDRESS	~~240 S PINEAPPLE AVE, SUITE 400~~ Ste.900	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34236	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	KLINGENSMITH, JACK H 1515 Ringling Blvd	4.2 NAME	
STREET ADDRESS	~~240 S PINEAPPLE AVE, SUITE 400~~ Ste.900	4.3 STREET ADDRESS	
CITY-ST-ZIP	~~SARASOTA FL 34236~~	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MILONAS, TASO M 1515 Ringling Blvd	5.2 NAME	
STREET ADDRESS	~~240 S PINEAPPLE AVE, SUITE 400~~ Ste.900	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34236	5.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	THOMISON, JAMES E 1515 Ringling Blvd	6.2 NAME	
STREET ADDRESS	~~240 S PINEAPPLE AVE, SUITE 400~~ Ste.900	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34236	6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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 — 941-364-8787
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #