

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90071 033 ***150.00

DOCUMENT # P98000104104
 1. Entity Name
BW-SARASOTA, INC.
HOMES FOR RENT AMERICA, INC

Principal Place of Business Mailing Address
~~107 CORPORATION WAY, STE. C~~ ~~107 CORPORATION WAY, STE. C~~
 VENICE FL 34292 VENICE FL 34292



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 1225 Rosedale Rd. P.O. Box 1426
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Venice FL TALLEVAST FL
 Zip Country Zip Country
 34293 USA 34270 USA

4. FEI Number **NOT APPLICABLE** Applied For
 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BETTERTON, GREG A
~~915 S TAMM DRIVE~~
~~NOKOMIS FL 34275~~

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 981 Bridgewood Ave, Suite 101
 City VENICE FL Zip Code 34292

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WATERS, THOMAS	
STREET ADDRESS	107 CORPORATION WAY, STE. C	
CITY-ST-ZIP	VENICE FL 34292	
TITLE	D	<input type="checkbox"/> Delete
NAME	BATTAGLIA, KARI A	
STREET ADDRESS	107 CORPORATION WAY, STE. C	
CITY-ST-ZIP	VENICE FL 34292	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P, T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	P.O. Box 1426	
CITY-ST-ZIP	TALLEVAST FL 34270	
TITLE	VP, S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1225 Rosedale Rd.	
CITY-ST-ZIP	Venice FL 34293	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Kari Battaglia* Kari Battaglia 4/26/01 (941) 321-2250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)