

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90048 009 ***150.00

DOCUMENT # P99000108629

1. Entity Name
PALACE PARTNERS OF SARASOTA, INC.

Principal Place of Business

Mailing Address

1343 MAIN ST., 7TH FLOOR
 SARASOTA FL 34236

1343 MAIN ST., 7TH FLOOR
 SARASOTA FL 34236



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1 South School Ave.

1 South School Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 1000

Suite 1000

City & State

City & State

Sarasota, Florida

Sarasota, Florida

Zip

Country

Zip

Country

34237 USA

34237 USA

4. FEI Number

65-0969889

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MATZKIN, STEVEN R
 1343 MAIN ST., 7TH FLOOR
 SARASOTA FL 34236

Name
 Matzkin, Steven R

Street Address (P.O. Box Number is Not Acceptable)

1 South School Avenue, Ste 1000

City
 SARASOTA,

FL

Zip Code
 34237

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	MATZKIN, STEVEN R	1343 MAIN ST., 7TH FLOOR	SARASOTA FL 34236	<input checked="" type="checkbox"/>
P	MATZKIN, STEVE	15 SCHOOL AVE. STE 1000	SARASOTA FL 34237-6046	<input type="checkbox"/>
O	OLAN, MITCHELL	15 SCHOOL AVE. STE 1000	SARASOTA FL 34237-6046	<input type="checkbox"/>
O	CORONA, DENNIS	15 SCHOOL AVE. STE 1000	SARASOTA FL 34237-6064	<input type="checkbox"/>
O	VICK, MAC	P.O. BOX 6119	SARASOTA FL 34278	<input type="checkbox"/>
O	CORONA, DENNIS	1343 MAIN ST 7TH FL	SARASOTA FL 34236	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	Matzkin, Steve	1 South School Ave, Ste 1000	SARASOTA, FL 34237-6046	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	OLAN, Mitchell	1 South School Ave, Ste 1000	SARASOTA, FL 34237-6046	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Corona, Dennis	1 South School Ave, Ste 1000	SARASOTA, FL 34237-6046	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Vick, mac	P.O. Box 6119	SARASOTA, FL 34278	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Corona, Dennis	1 South School Ave, Ste. 1000	SARASOTA, FL 34237-6064	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/25/02

941-951-3150

CP2E034 (9/01)