

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 11:19

DOCUMENT # N93000003949 (5)

1. Corporation Name

HI-TECH COUNCIL OF SARASOTA AND MANATEE COUNTIES
INC.

Principal Place of Business

Mailing Address

2201 CANTU CT
#116
SARASOTA FL 34232

4060 ROBERTS PT RD
SARASOTA FL 34242

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/31/1993

3a. Date of Last Report

08/15/1994

4. FEI Number

65-0451704

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$66.75 Additional
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BACH, BABETTE BRYAN ESQ.
4060 ROBERTS POINT RD.
SARASOTA FL 34242

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

KORCHEK, STEPHEN J DR.

STREET ADDRESS

5840 26TH STREET WEST

CITY-ST-ZIP

BRADENTON FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

V. D. C.

Peter Yates

1718 Main Street

SARASOTA, FL 34236

☐ Change

☒ Addition

TITLE

SVD

NAME

BACH, BABETTE B ESQ

STREET ADDRESS

4060 ROBERTS POINT ROAD

CITY-ST-ZIP

SARASOTA FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

M. V. D.

Ralph Raultke

P.O. Box 49946

SARASOTA, FL 34230

☐ Change

☒ Addition

TITLE

~~PD~~

NAME

~~ROBERTS, JAMES~~

STREET ADDRESS

2201 CANTU COURT SUITE 116

CITY-ST-ZIP

SARASOTA FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

T. D.

THOMAS RAY

240 So Pineapple Ave

SARASOTA, FL 34236

☒ Change

☐ Addition

TITLE

VD

NAME

DEROSE, RODGER L

STREET ADDRESS

2805 FRUITLAND ROAD

CITY-ST-ZIP

SARASOTA FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

VD

NAME

RAY, THOMAS N

STREET ADDRESS

240 S PINEAPPLE AVENUE

CITY-ST-ZIP

SARASOTA FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

D

NAME

MICHALSON, GORDON E JR

STREET ADDRESS

5700 N. TAMAMI TRAIL

CITY-ST-ZIP

SARASOTA FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature #