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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9600001116 (0)

FINAL TRIBUTE, INC.

Principa			Business
1000 N	FACT	AVC	

SIGNATURE:

Mailing Address

## FILED Apr 08 1997 8:00am Secretary of State



1000 N EAST A SARASOTA FL		1000 N EAST AVE SARASOTA FL 34237-3416		•			
				3. Date Incorporated or Qualified 03/04/1996	Sa. Date of Last Report		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		43-1298105	Not Applicable		
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22	1. 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	27		a. Certificate of Glatos Desired	Fee Required		
City & State	p	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be		
23		28		Trust Fund Contribution	☐ Added to Fees		
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032, Yes □ No		
24	9. Name and Address of Current		10	Florida Statutes  10. Name and Address of New Re			
VOIGT, STEPHEN F 2414 BEE-RIDGE RD SARASOTA FL 34239  Lauge  81 Name A. V. Botti GER 82 Street Address (P.O. Box, Number is Not Acceptable) WATER SWIN 83							
			84 City	GARASOTA,	FL 85 Zip Code 3 5		
11. Pursuant t	to the provisions of Sections 607.0502 enistered agent, or both, in the State of	and 607.1508, Florida Statutes	s, the above named co	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered		
agent la	m familiar with, and accept the obligati	ons of, Section 607.0505, Flo	Men H	1	A was appointment as registered		
SIGNATURE	13. V · 130	ALIKE //OC	The street of		4-3-97		
12.	Signature, typied or printed harrie of registered agent OFFICERS AND		Registered frent signal region	uired fren reinstating) ADDITIONS/CHANGES TO OFFICE	SERS AND DIRECTORS IN 12		
THILE	P	DELETE	1.1 TITLE	/	Change Addition		
NAME	BOTTIGER, PATRICIA A		1.2 NAME	•			
STREET ADDRESS	4836 WATERBRIDGE DOWNS		1.3 STREET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34235		1.4 CHTY-ST-ZIP				
TRILE	V\$ + T	DELEYE	2.1 TITLE		Change Addition		
NAME	BOTTIGER, A V JR		2.2 NAME				
STREET ADDRESS	4836 WATERBRIDGE DOWNS		2.3 STREET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34235	<b>\</b> /	2.4 CITY-ST-ZIP				
TITLE	T	DELETE	3.1 TITLE		Change Addition		
NAM <del>E</del>	ROSS, JOHN R		3.2 NAME		į		
STREET ADORESS	RT 3 BOX 238B		3.3 STREET ADDRESS				
C(1Y - S1 - ZIP	FAIRGROVE MO 65648		3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CiTy - ST - ZIP			4.4 CITY - ST - ZIP	·	150		
TULE		DELETE	5.1 TITLE		Change Addition		
NAME			5.2 NAME				
STHEET ADDRESS			5.3 STREET ADDRESS				
CITY-\$1-ZIF		Driete	5.4 CITY - ST - ZIP		Charge Laborer		
111LE		☐ DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST ZIP	ou cartify that the referencian aurestical	with this filing does not available	for the exemption state	ed in Section 119 07/3/6). Elected Chat the	e I further certifu that the		
14. I do 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 is 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.							