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FILED  
Apr 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 353332 (0)  
1. Corporation Name  
MORTON'S MARKET, INC.



Principal Place of Business

1924 S OSPREY AVE  
SARASOTA FL 34239

Mailing Address

1924 S OSPREY AVE  
SARASOTA FL 34239

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 306 GOLDEN GATE PT.

Suite, Apt. #, etc.

22 UNIT 7

City & State

23 SARASOTA, FLORIDA

Zip

24 34236

Country

USA

2a. Mailing Address

26 P. O. BOX 2827

Suite, Apt. #, etc.

27

City & State

28 SARASOTA, FLORIDA

Zip

29 34230-2827

Country

USA

3. Date Incorporated or Qualified

10/03/1969

4. FEI Number

59-1271329

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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

MORTON JR, E W  
1924 S OSPREY AVE  
SARASOTA FL 34239-3616

10. Name and Address of New Registered Agent

81 Name

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

306 GOLDEN GATE PT.

83

UNIT 7

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
CD  
MORTON JR, E W  
STREET ADDRESS  
1328 HILLVIEW DR.  
CITY - ST - ZIP  
SARASOTA FL

TITLE ☐ DELETE

NAME  
PD  
MORTON III, E W  
STREET ADDRESS  
1924 SO OSPREY DR.  
CITY - ST - ZIP  
SARASOTA FL

TITLE ☐ DELETE

NAME  
D  
MORTON, P F  
STREET ADDRESS  
1328 HILLVIEW DR.  
CITY - ST - ZIP  
SARASOTA FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

306 GOLDEN GATE PT. UNIT 7  
SARASOTA, FL 34236

1.4 CITY - ST - ZIP

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

304 BEACH ROAD UNIT 2A  
SARASOTA, FL 34242

2.4 CITY - ST - ZIP

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

306 GOLDEN GATE PT. UNIT 7  
SARASOTA, FL 34236

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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:

*Sandra B. Mortham*

4/3/98 941 366 1771

CR2E034 (10/97)