2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 377702

1. Entity Name

SARÁSOTA'S CAPTAINS TABLE, INC.



Principal Place of Business

3232 N TAMIAMI TRAIL

BLDG. B

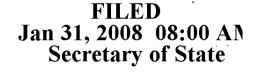
SARASOTA, FL 34234

Mailing Address

3232 N TAMIAMI TRAIL

BLDG, B

SARASOTA, FL 34234





DO NOT WRITE IN THIS SPACE

01222008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1058479

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

ELLIS, NICK V JR 3232 N TAMIAMI TRAIL BLDG. B SARASOTA, FL 34234 DO NOT WRITE IN THIS SPACE

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	am familiar with, and accept
the obligations of registered agent.	·

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating

DATE

FILE NOW!!! FEE !S \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees 000000809029 02/08/08-80006-001 150.00

OFFICERS AND DIRECTORS 10. TITLE NAME ELLIS, NICK V JR 3232 N TAMIAMI TRAIL, BLDG, B STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34234 TITLE ELLIS, RICHARD V NAME STREET ADDRESS 3232 N TAMIAMI TRL BLDG B SARASOTA, FL 34234 CITY-ST-ZIP TITLE ELLIS, MILDRED P NAME STREET ADDRESS 3232 N TAMIAMI TRAIL, BLDG. B CITY-ST-ZIP SARASOTA, FL 34234 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment an address, with all other like empowered.

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

MICK V. ELUS PRES

<u>1- 23-08</u>

3 941-355-*7175*

Daytime Phone #