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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 527930

1. Corporation Name

STOKES REALTY OF SARASOTA, INC.

FILED
Apr 13, 1999 8:00 am
Secretary of State
V

04-13-1999 90001 019 ***150.00

-												
Principal Place	e of Business	M	ailing Address	-		محتمي	= ت					1
4637 SAWYER RD 4637 SAWYERS. FL												ļ
SARASOTA FL 34233 SARASOTA FL 34233 US								DO NOT WRITE IN THIS SPACE				
US		U	,					3. Date Incorporated or Qualifed		•		ן ו
				-			\ \	03/16/1977				{ }
2. Principal Pl	lace of Business	2a.	. Mailing Address				- 	4. FEI Number		A	pplied For	1
21	26							59-1726744		N	ot Applicable] :
Suite, Apt. #, etc. Suite, Apt. #, etc.								5. Certifcate of Status Desired			Additional	'
22 27								. Certificate of Otatos Besides		Fee R	equired	4
City & State City & State								Election Campaign Financing	ri		May Be	١,
23		28			 .			Trust Fund Contribution			to Fees	} ;
Zip Country Zip			Zip	Country				B. This corporation owes the currer	it year Inta	ingible □ Yes	⊠No	
24	25	29		30				Personal Property Tax. D. Name and Address of New Re	aistared i		<u> </u>	- '
	9. Name and Address of Curre	nt Regis	steren Agent		81	Name		o, Maille alla Addiess of New No	giotorou r	· gont		1 :
STO	KES, MILDRED				Ш	_		······				
4637 SAWYER RD					82	Street Ac	ddress	(P.O. Box Number is Not Acceptab				
SAR	ASOTA FL 34233				83			·	_			1
					Ш							4
					84	City			FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 6	07,1508, Florida Stat	ites, the a	bove	-named c	orporati	on submits this statement for the p	urpose of	changing it	s_registered <u></u>	-
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	of Flori	da. Such change was Section 607 0505 F	authorizé	d by utes	the corpora	ration's	board of directors. I hereby accept	the appoir	ntment as re	egistered	١.,
_	m rammar with, and accept the cong	0.10110 01	, 00000, 007,0000, 7			-						
SIGNATURE	Signature, typed or printed name of registered ag	ent and title	rf applicable. (NO	TE: Registered	Agen	t signature req	quired whe	<u></u>	DATE			l a
12.	OFFICERS A	ND DIRE		13.				ADDITIONS/CHANGES TO OFFI	CERS AN			(11/98)
TITLE	PD		☐ DELETE	1.1 T	īΕ					☐ Change	☐ Addition	
NAME	STOKES, MILDRED			1.2 N	AME							F034
STREET ADDRESS	4637 SAWYER RD			1.3 \$	TREET	ADDRESS			•			7
CITY-ST-ZIP	SARASOTA FL				TY-S1	r-ZIP				Change	Addition	۲ ۲
TITLE	D DEPOSITE OFFICE AND A SECOND AND A SECOND ASSESSMENT OF THE POSITION AND A SECOND AND A SECOND AND A SECOND ASSESSMENT OF THE POSITION ASSESSMENT OF		☐ DELETE	2.1 T						Change		~
NAME	STOKES, DEBORAH L.			2.2 N								
STREET ADDRESS	4637 SAWYER RD					ADDRESS						1
CITY-ST-ZIP	SARASOTA FL		☐ DELETE	2. 4 C	TIY-S	T-ZIP			_	☐ Change	Addition	1
TITLE	DONOGHUE, JANE S.			3.1 T								
NAME	4637 SAWYER RD					ADDRESS						1
STREET ADDRESS	SARASOTA FL			1					•			ł
CITY-ST-ZIP TITLE	D D	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	DELETE	4.1 T	ΣTY-S ΠΙΕ	1-20P	_			☐ Change	☐ Addition	7
NAME	AABYE, CAROLYN			4.21		İ				_ •		1
STREET ADDRESS	4007 ANIANTO DD					ADDRESS						
CITY-ST-ZIP	-SARASOTA FL				ITY-S1							1
TITLE	D	•	DELETE	5.1 T				·		Change	Addition	1
NAME	FALCONER, CHRISTINE STO	K		5.2 N	AME							
STREET ADDRESS	4637 SAWYER RD			5.3 S	TREET	ADDRESS						1
CITY-ST-ZIP	SARASOTA FL			5.4 C	ITY-S1	r-ZIP]
TITLE			☐ DELETE	, 6.1 T	TLE					☐ Change	Addition	1
NAME	·.			6.2 N	AME							1
1 1	I			1								1
STREET ADDRESS				6.3 \$	TREET	ADDRESS						ì

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, with all other like empowered.

SIGNATURE: