FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #**

547550

(4)

THE BIG APPLE OF SARASOTA SQUARE, INC.				 	#1 00 11 0:0 11 4:0 11 0:0 14 0	EN BIBILDARI (BB)
Principal Place of Business	Mailing Address					
P O BOX 15245 P.O. BOX		PPLE OF SARASOTA IOX 18923 SOTA FL 34276				
	US			3. Date Incorporated or Qualified	3a. Date of Last I	•
2. Principal Place of Business	2a. Mailing Address			09/26/1977 4. FEI Number	03/23/1	Applied For
11	26			59-1300924	 	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired	1 1	5 Additional Required
City & State	City & State 28			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
7φ Country 4 25	Zip 29]	Country 30		8. This corporation has liability for intangible tax under s 199,032, Florida Statutes Yes No		
g. Name and Address of Current R	egistered Agent			10. Name and Address of New R	egistered Agent	
		81	Name			
BOXER, BENJAMIN		82	Street Add	ress (P.O. Box Number is Not Acceptab	ile)	
2956 CAPTIVA DRIVE		83				
SARASOTA FL 34231		03	!			
		84	City		FL 85 Z	ip Code
 Pursuant to the provisions of Sections 607.0502 an or registered agent, or both, in the State of Florida. ferrillar with, and accept the obligations of, Section SIGNATURE 	607.0505, Florida Statutes		oration's boai	ro of directors. I hereby accept the appo	DATE	d agent. I am
12. OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFI		ORS IN 12
ILLE A	DEFELE	1 1 THILE			☐ Change	
WOODWARD, HAROLD	,	12 NAME	Ì			
5124 HARPERS CRAFT RD.		1 3 STREET	ADDRESS			
SARASOTA, FLORIDA 00000	[7] DELETE	1.4 CHTY-S 2 1 TITLE	r-zip			
PU			ļ		☐ Change	☐ Addition
BOXER, BENJAMIN STATE LABORESS 2956 CAPTIVA DR.		2 2 NAME 2 3 STREET	VD/DECC			
SARASOTA, FLORIDA 00000		2 4 CITY - S				
1.1.1	S DELETE		1-217		☐ Change	Addition
BOXER, JANET		3.2 NAME			<u> </u>	_
S REFFADERESS 2956 CAPTIVA DRIVE		3 3 STHEFT	ADDRESS			
SARASOTA, FLORIDA .00000_		3.4 CITY · S	I-ZIP			
1016	DELFTE	4 1 TITLE			Change	Addition
VAME SCHALL ADOPTES		4.2 NAME	********			
Cify Sty Zife		43 STREET				
RIGE	DELETE	4.4 CITY-S 5 1 TITLE	- 4)1		Change	Addition
NAME		5.2 NAME				
STREET ADDRESS		53STREET	ADDRESS			
CHY-SI ZIP		5 4 CITY - S	r- 7 iP			
III.f	☐ DELETE	6 1 THILE			Change	■ Addition
NAM:		6.2 NAME				
STHEFT ACCRESS CHITY-ST-ZIP		63 STREET				
14. I do hereby certify that the information supplied with	this filing is voluntarily furn	64 CITY-Si ished and does	not qualify for	or the exemption stated in Section 119.	07(3)(k), Florida Stati	des. I further
ceruly that the information indicated on this annual r	eport or supplemental anni	uai report is tru	e and accura	ite 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 appears in Block 12 or Block 13 if changed, or on a	in attachment with a laddo	es.		1/nnin	01100	//b/-
SIGNATURE: V SIGNATURE AND TYPE OF PA	MUN A	O L	TH	Es. V23/16	741 924 Daytine Priori	17/7